



Clean Harbors Environmental Services, Inc.  
2247 South Highway 71  
Kimball, Nebraska 69145  
308.235.4012  
www.cleanharbors.com

Sent via FedEx

June 24, 2019

Mr. David Haldeman  
Nebraska Department of Environmental Quality  
1200 N Street, Suite 400  
Lincoln, NE 68509-8922

RECEIVED

JUN 26 2019

RE: March 26-29, 2019 RCRA Compliance Evaluation Inspection  
DEQ/EPA ID Number: NED981723513  
IIS#: 58562 RCR

Nebraska Dept of Environmental Quality  
By: \_\_\_\_\_ DEQ#182 \_\_\_\_\_

Dear Mr. Haldeman:

The purpose of this letter is to respond to the Notice of Violation dated May 23, 2019 and received by Clean Harbors Environmental Services, Inc. (CHESI) on May 29, 2019. The alleged violations and concerns are listed below followed by the CHESI response.

Alleged Violation 1 – Failure to visibly mark the date upon which each period of accumulation begins on a 90-day hazardous waste accumulation container (Title 128, Chapter 10, 004.01F.)

**CHESI Response:**

***Per NDEQ, container CHIU320062 was dated at the time of the inspection. No further action is required with regard to this alleged violation.***

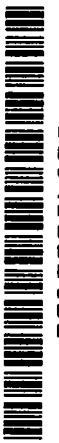
Alleged Violation 2 – Failure to accept, store, and accumulate in containers only the wastes identified in Appendix I of the permit (Part III.C.8 of RCRA Permit.)

**CHESI Response:**

***NDEQ performed an on-site manifest review using the RCRAInfo E-Manifest system and identified acceptance of three inbound manifests and shipment of two outbound manifests with waste codes not included in the RCRA permit.***

***Upon review of the manifests submitted by NDEQ, the following manifests did not list waste codes unacceptable for receipt at the CHESI facility:***

- 1) Inbound manifest 009940379FLE (see Attachment 1) was shipped and received at CHESI under generic company profile LCCRQ-INTER. The waste codes associated with the generic company profile were uploaded to the E-Manifest system for line item 13. However, the hard copy of the manifest for line item 13 lists D001 as the only waste code for that waste stream. The inclusion of additional waste codes was determined to be an administrative error.***



5E945006102



*Personnel were informed of the correct procedure to input waste code information in the CHESI WINWeb system to upload correctly into the E-Manifest system.*

- 2) Outbound manifests 010885148FLE (see Attachment 2) and 013261800FLE (see Attachment 3) were shipped and received at CHESI under generic company profiles LCCRB-HAZ and CCRKS-INTER, respectively. The waste codes associated with the generic company profiles were uploaded to the E-Manifest system for each manifest. The hard copy of manifest 010885148FLE for line item 9 does not list any waste codes for that waste stream. The hard copy of manifest 013261800FLE for line item 2 lists acceptable waste codes for that waste stream. The inclusion of additional waste codes was determined to be an administrative error, and personnel were informed of the correct procedure to input waste code information in the CHESI WINWeb system to upload correctly into the E-Manifest system. Outbound manifest waste codes are also reviewed for acceptance in the weekly Received Waste Report.*

*Upon review of the manifests submitted by NDEQ, CHESI identified two manifests, 010923766JJK (see Attachment 4) and 010923781JJK (see Attachment 5), were received with waste codes not identified in Appendix I, Part III.C.8 of the RCRA permit.*

*On February 11, 2019, CHESI responded to a notice of violation sent by NDEQ on November 13, 2018 for the acceptance of waste codes not identified in the RCRA permit. This response identified that the acceptance of waste codes not identified in the RCRA permit was due to administrative error. Corrective actions were implemented at that time, which included notification that the employees involved in the administrative errors were no longer working in the job function in which the error occurred and implementation of providing specific guidance and directive to the Facility Coordinators and Compliance Guards of the requirement to review documentation for acceptable waste codes prior to acceptance of manifested waste at CHESI. The receipt of waste from manifests 010923766JJK and 010923781JJK, which were shipped and received at CHESI (see Attachment 6) under labpack profiles LCCRD and LCCRC, respectively, occurred prior to implementation of the corrective actions from the previous notice of violation*

*Based upon the current NDEQ inspection, CHESI has developed additional corrective action for the facility Environmental Compliance Manager to receive and review the Received Waste Report on a weekly basis. This review will assess acceptability of all assigned waste codes for waste material scheduled to be received on-site.*

*This alleged violation was previously addressed in the February 11, 2019 CHESI response to the NDEQ NOV dated November 13, 2018. We respectfully request this be rescinded.*

***Attachments:***

- 1 Manifest 009940379FLE***
- 2 Manifest 010885148FLE***
- 3 Manifest 013261800FLE***
- 4 Manifest 010923766JJK***
- 5 Manifest 010923781JJK***
- 6 WINWeb Drum Tracking Screens for Manifests 010923766JJK and 010923781JJK***



Concern 1 – During the inspection, several containers in storage Area 25 and one container in Area 95 appeared to have leaked some of their contents through the bung. Though these containers were immediately processed upon discovery, the CHESI RCRA Permit requires that waste from containers that begin to leak must be managed as described within 24 hours.

***CHESI Response:***

***During the two weeks prior to the NDEQ inspection, excessive weather conditions occurred across the state of Nebraska and the Kimball region experienced significant heavy snowfall and blizzard conditions with severe freezing temperatures. The inspection occurred during a rise in temperatures, which resulted in container thawing. Upon discovery of the potential leaks due to thawing, the containers were removed from container storage and were processed during the inspection visit. The facility's standard practice upon discovery of potential leaks is to overpack and process the container immediately, as described in the facility Waste Analysis Plan (see Attachment 7).***

***Attachment:***

***7 CHESI Waste Analysis Plan***

Concern 2 – The facility contingency plan still made reference to an after-hours contact phone number for the NDEQ that is no longer valid. Please update any after-hours emergency contact references for State Patrol Dispatch from (402) 471-4545 to (402) 479-4921.

***CHESI Response:***

***A Class 3 permit modification is in progress to increase facility container storage, which includes revisions to the Contingency Plan. The current redlined version of the Contingency Plan that is to be submitted for the permit modification has been edited to include the correct emergency contact number for the State Patrol Dispatch (see Attachment 8). The Contingency Plan revision will be submitted with the permit modification.***

***Attachment:***

***8 CHESI Contingency Plan Redline Copy***

Concern 3 – Inspection of Ash Day Bin D found surface corrosion around a portion of its base that must be repaired.

***CHESI Response:***

***Following the inspection, CHESI investigated the cause of corrosion on the day bin and determined that it was due to prior hoisting operations in the area. A work order was written on 4/30/2019 (see Attachment 9) to repair the paint of the affected area of the day bin and the repair was completed on 5/3/2019.***

***Attachment:***



**9 CHESI Work Order #041480**

Concern 4 – Inspection of the secondary containment in Area 50E found some spalling in the concrete that required repair.

***CHESI Response:***

***Per NDEQ, work orders provided during the inspection confirmed that this item had been repaired and no further action is required to these concerns.***

Concern 5 – The ash sampler was found to be non-functional and the sample jar unlabeled at the time of the inspection. NDEQ stated that a work order provided during the inspection confirmed the ash sampler had been repaired.

***CHESI Response:***

***A work order was written for the ash sampler at the time of the inspection (see Attachment 10) and the repair was completed on 3/27/2019. Ash sampler function is included in Area 80's daily inspection checklist.***

***Attachment:***

**10 CHESI Work Order #041275**

Should you have any questions, please contact Alyssa King, Environmental Compliance Manager, at (308) 235-8212 or via email at [king.alyssa@cleanharbors.com](mailto:king.alyssa@cleanharbors.com).

Sincerely,

A handwritten signature in black ink, appearing to read "Brad Reader".

Brad Reader  
General Manager  
[readerb@cleanharbors.com](mailto:readerb@cleanharbors.com)



**Attachment 1**

**Inbound Manifest 009940379FLE**

V18082435

|  |  |  |  |                          |  |   |                   |                                  |
|--|--|--|--|--------------------------|--|---|-------------------|----------------------------------|
| UNIFORM HAZARDOUS WASTE MANIFEST   |  | 1. Generator ID Number<br><b>WAD981769110</b>  |  | 2. Page 1 of<br><b>3</b> | 3. Emergency Response Phone<br><b>(800) 483-3718</b> | 4. Manifest Tracking Number<br><b>009940379 FLE</b> |                   |                                  |
|  |  | 5. Generator's Name and Mailing Address<br><b>Emerald Services, Inc<br/>1825 Alexander Avenue<br/>Tacoma, WA 98421<br/>Generator's Phone: 253-633-6073</b> |  |                          |  |   |                   |                                  |
| 6. Transporter 1 Company Name<br><b>Emerald Services, Inc</b>  |  |  |  |                          |  | U.S. EPA ID Number<br><b>WAD058364647</b>           |                   |                                  |
| 7. Transporter 2 Company Name<br><i>Clean Harbors</i>  |  |  |  |                          |  | U.S. EPA ID Number<br><i>WAD058364647</i>           |                   |                                  |
| 8. Designated Facility Name and Site Address<br><b>Clean Harbors Environmental Services, Inc.<br/>2247 South Highway 71<br/>Kimball, NE 68145<br/>Facility's Phone: (308) 235-4012</b>   |  |  |  |                          |  | U.S. EPA ID Number<br><b>NED981723513</b>           |                   |                                  |
| GENERATOR  | 9a. HM   | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))   |  |                          | 10. Containers<br>No. Type                           | 11. Total Quantity                                  | 12. Unit Wt./Vol. | 13. Waste Codes                  |
|  | X  | 1. RQ, UN1950, WASTE AEROSOLS, FLAMMABLE, (EACH NOT EXCEEDING 1 L CAPACITY), 2.1 (D001)  |  |                          | 001 BA   | 00465   | P                 | D001 D035 WT02                   |
|  | X  | 2. RQ, UN1263, WASTE PAINT, (PAINT RELATED MATERIAL), 3, PG II (D001)  |  |                          | 002 DM   | 00331   | P                 | D001 D005 D006<br>D007 D008 D035 |
|  | X  | 3. RQ, UN1263, WASTE PAINT, (PAINT, THINNER (LACQUER THINNER)), 3, PG II (D001)  |  |                          | 002 DM   | 00255   | P                 | D001 D018 D035<br>D039 D040 F003 |
|  | X  | 4. RQ, UN1263, WASTE PAINT RELATED MATERIAL, (PAINT PIGMENTS), 3, PG II (D001)   |  |                          | 001 DM   | 00075   | P                 | D001 D005 D006<br>D018 D035 D039 |
| 14. Special Handling Instructions and Additional Information<br>1. LCCRO-INTER EFG#126 1IDAG<br>2. F03-INTER EFG#128 1X30, 1X10<br>3. F03-INTER EFG#128 2X15<br>4. F04-INTER EFG#128 1X15<br>Contact retained by generator confers agency authority on initial transporter to add or substitute additional transporters on generator's behalf  |  |  |  |                          |  |   |                   |                                  |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.<br>I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. |  |  |  |                          |  |   |                   |                                  |
| Generator's/Officer's Printed/Typed Name <i>T. Baehe</i> Signature <i>Tina Baehe</i> Month <i>06</i> Day <i>15</i> Year <i>18</i>  |  |  |  |                          |  |   |                   |                                  |
| TRANSPORTER  | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____   |  |  |                          |  |   |                   |                                  |
|  | 17. Transporter Acknowledgment of Receipt of Materials<br>Transporter 1 Printed/Typed Name <i>Tim Simon</i> Signature <i>Tim Simon</i> Month <i>08</i> Day <i>15</i> Year <i>18</i><br>Transporter 2 Printed/Typed Name <i>Paula Maf</i> Signature <i>Paula Maf</i> Month <i>08</i> Day <i>15</i> Year <i>18</i>                       |  |  |                          |  |   |                   |                                  |
| DESIGNATED FACILITY  | 18. Discrepancy<br>18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input checked="" type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection<br><i>See page 2 of 3, section 35 8-28-18K</i><br>Manifest Reference Number: _____ |  |  |                          |  |   |                   |                                  |
|  | 18b. Alternate Facility (or Generator) _____ U.S. EPA ID Number _____  |  |  |                          |  |   |                   |                                  |
|  | Facility's Phone: _____  |  |  |                          |  |   |                   |                                  |
|  | 18c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____   |  |  |                          |  |   |                   |                                  |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)<br>1. <b>H141</b> 2. <b>H040</b> 3. <b>H040</b> 4. <b>H040</b>   |  |  |  |                          |  |   |                   |                                  |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a<br>Printed/Typed Name <i>Jessica Egpli</i> Signature <i>Jessica Egpli</i> Month <i>08</i> Day <i>15</i> Year <i>18</i>  |  |  |  |                          |  |   |                   |                                  |

|  |   |  |                           |   |                     |
|--|---|--|---------------------------|---|---------------------|
| UNIFORM HAZARDOUS WASTE MANIFEST<br>(Continuation Sheet)   |   | 21. Generator ID Number<br><b>WAD981769110</b> | 22. Page<br><b>2 of 3</b> | 23. Manifest Tracking Number<br><b>009940379FLE</b> |                     |
| 24. Generator's Name<br><b>Emerald Services, Inc</b>   |   |  |                           |   |                     |
| 25. Transporter <b>3</b> Company Name<br><b>Steve Foster Trucking</b>  |   | U.S. EPA ID Number<br><b>EDR000205625</b>      |                           |   |                     |
| 26. Transporter _____ Company Name   |   | U.S. EPA ID Number                             |                           |   |                     |
| 27a. HM  | 27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 28. Containers<br>No.                          | Type                      | 29. Total Quantity                                  | 30. Unit<br>WL/Vol. |
| X  | 5. RO. UN1263. WASTE PAINT RELATED MATERIAL. (ACETONE, XYLENE). 3. PG II (D001)                                 | 001  | DM                        | 00251   | P                   |
|  |   |  |                           |   | D001 D018 D035      |
|  |   |  |                           |   | D039 D040 F003      |
| X  | 6. RO. UN1263. WASTE PAINT. (ACETONE, BENZENE). 3. PG II (D001)   | 015  | DM                        | 05011   | P                   |
|  |   |  |                           |   | D001 D004 D005      |
|  |   |  |                           |   | D006 WP01 WP02      |
| X  | 7. RO. UN1090. WASTE ACETONE. 3. PG II (D001)   | 002  | DM                        | 00921   | P                   |
|  |   |  |                           |   | D001 D035 F003      |
| X  | 8. RO. UN1263. WASTE PAINT RELATED MATERIAL. (DEBRIS, ACETONE). 3. PG II (D001)                                 | 007  | DM                        | 03139   | P                   |
|  |   |  |                           |   | D001 D004 D005      |
|  |   |  |                           |   | D006 WP01 WP02      |
| X  | 9. RO. UN1993. WASTE FLAMMABLE LIQUIDS, N.O.S., (NITROETHANE, SEC-BUTANOL). 3. PG III (D001)                    | 001  | DM                        | 00399   | P                   |
|  |   |  |                           |   | D001 D005 D007      |
| X  | 10. RO. UN1993. WASTE FLAMMABLE LIQUIDS, N.O.S., (4-METHYL-2-PENTANONE). 3. PG III (D001)                       | 003  | DM                        | 01596   | P                   |
|  |   |  |                           |   | D001 F003           |
| X  | 11. RO. UN3175. WASTE SOLIDS CONTAINING FLAMMABLE LIQUID, N.O.S., (ACETONE, TOLUENE). 4.1. PG II (D001)         | 006  | DM                        | 01690   | P                   |
|  |   |  |                           |   | D001 D004 D005      |
|  |   |  |                           |   | D006 D007 D008      |
| X  | 12. RO. UN3175. WASTE SOLIDS CONTAINING FLAMMABLE LIQUID, N.O.S., (ACETONE, XYLENE). 4.1. PG II (D001)          | 021  | DM                        | 05329   | P                   |
|  |   |  |                           |   | D001 D004 D005      |
|  |   |  |                           |   | D006 D007 WT02      |
| X  | 13. RO. UN3175. WASTE SOLIDS CONTAINING FLAMMABLE LIQUID, N.O.S., (ACETONE, TOLUENE). 4.1. PG II (D001)         | 001  | DM                        | 00220   | P                   |
|  |   |  |                           |   | D001                |
| X  | 14. UN3082. WASTE ENVIRONMENTALLY HAZARDOUS SUBSTANCES, LIQUID, N.O.S., (DI(2-ETHYLHEXYL) PHTHALATE). 9. PG III | 001  | DM                        | 00103   | P                   |
|  |   |  |                           |   | WT02                |
| 32. Special Handling Instructions and Additional Information   |   |  |                           |   |                     |
| FD4-INTER ERG#128 1X30 9. CCRKs-INTER ERG#128 1X55 13. FD5-INTER ERG#133 1X55  |   |  |                           |   |                     |
| FD3-INTER ERG#128 1X55 10. FD3-INTER ERG#128 3X55 14. FD3-INTER ERG#171 1X15   |   |  |                           |   |                     |
| FD3-INTER ERG#127 2X55 11. CCRK-INTER ERG#133 6X55   |   |  |                           |   |                     |
| FD4-INTER ERG#128 7X55 12. FD5-AIR ERG#133 21X55   |   |  |                           |   |                     |
| 33. Transporter <b>3</b> Acknowledgment of Receipt of Materials  |   |  |                           |   |                     |
| Printed/Typed Name<br><b>Dustin Shank</b>  |   | Signature<br><b>Dustin Shank</b>               |                           | Month Day Year<br><b>08/17/18</b>                   |                     |
| 34. Transporter Acknowledgment of Receipt of Materials   |   |  |                           |   |                     |
| Printed/Typed Name   |   | Signature                                      |                           | Month Day Year                                      |                     |
| 35. Discrepancy<br><b>Remove waste from Lines 14 section 27b per Jason Collins. JE 8-21-18</b>   |   |  |                           |   |                     |
| 27b3: New Profile Assigned (LCCQ-Intro) UN1950, waste Aerosols, Flammable, (Each Not Exceeding 1L capacity), 2.1 D001 D005 per Jason Collins 8-18-18 |   |  |                           |   |                     |
| 36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)                      |   |  |                           |   |                     |
| 5. H040  |   | 6. H040  |                           | 7. H040   |                     |
| 10. H040   |   | 11. H040                                       |                           | 12. H040  |                     |
|  |   | 13. H040                                       |                           | 14. H040  |                     |

## GENERATOR

**Attachment 2**

**Outbound Manifest 010885148FLE**

|   |  |  |                            |  |   |                   |                 |                |
|---|--|--|----------------------------|--|---|-------------------|-----------------|----------------|
| UNIFORM HAZARDOUS WASTE MANIFEST  |  | 1. Generator ID Number<br><b>NE D981723513</b>   | 2. Page 1 of<br><b>3</b>   | 3. Emergency Response Phone<br><b>(800) 483-3718</b> | 4. Manifest Tracking Number<br><b>010885148 FLE</b> |                   |                 |                |
| 5. Generator's Name and Mailing Address<br><b>Clean Harbors Environmental Services, Inc.</b><br><b>2247 South Highway 71</b><br><b>Kimball, NE 68145</b><br>Generator's Phone: <b>(308) 235-4012</b>  |  | Generator's Site Address (if different than mailing address)<br><b>SAME</b>                          |                            |  |   |                   |                 |                |
| 6. Transporter 1 Company Name<br><b>Clean Harbors Environmental Services</b>  |  | U.S. EPA ID Number<br><b>MA9039322250</b>  |                            |  |   |                   |                 |                |
| 7. Transporter 2 Company Name   |  | U.S. EPA ID Number   |                            |  |   |                   |                 |                |
| 8. Designated Facility Name and Site Address<br><b>Clean Harbors El Dorado LLC</b><br><b>309 American Circle</b><br><b>El Dorado, AR 71730</b><br>Facility's Phone: <b>(870) 863-7173</b>   |  | U.S. EPA ID Number<br><b>ARD069748192</b>  |                            |  |   |                   |                 |                |
| 9a. HM  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) |  | 10. Containers<br>No. Type |  | 11. Total Quantity                                  | 12. Unit Wt./Vol. | 13. Waste Codes |                |
|   | X  | 1. UN3286, WASTE FLAMMABLE LIQUID, TOXIC, CORROSIVE, N.O.S., (SEE PACKING LIST), 3, (6.1), (8), PG I | 001                        | DF   | 00072   | P                 | D001            | D002 D022      |
|   | X  | 2. UN2924, WASTE FLAMMABLE LIQUIDS, CORROSIVE, N.O.S., (ACETONE, SODIUM HYDROXIDE), 3, (8), PG II    | 002                        | DF   | 00918   | P                 | D001            | D002 D009 F003 |
|   | X  | 3. UN2924, WASTE FLAMMABLE LIQUIDS, CORROSIVE, N.O.S., (HYDROCHLORIC ACID, METHANOL), 3, (8), PG II  | 001                        | DM   | 00416   | P                 | D001            | D002 F002 F003 |
|   | X  | 4. UN2924, WASTE FLAMMABLE LIQUIDS, CORROSIVE, N.O.S., (AMMONIUM PARAMOLYBDATE, ACS), 3, (8), PG III | 003                        | DF   | 00123   | P                 | D001            | D002           |
| 14. Special Handling Instructions and Additional Information<br>1. LCRD-BAS ERG#131 1X30<br>2. A22K-INT-ATR ERG#132 2X55<br>3. CCRC-ACID-LIQ ERG#132 1X55<br>4. CCRC-ACID-SL ERG#132 3X5  |  |  |                            |  |   |                   |                 |                |
| 15. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. |  |  |                            |  |   |                   |                 |                |
| Generator's Printed/Typed Name<br><b>Justin Brown for CHS</b>   |  | Signature<br><i>[Signature]</i>  |                            | Month Day Year<br><b>07 11 18</b>                    |   |                   |                 |                |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:  |  |  |                            |  |   |                   |                 |                |
| 17. Transporter Acknowledgment of Receipt of Materials<br>Transporter 1 Printed/Typed Name Signature Month Day Year<br><b>Doris [Signature]</b> <b>7 12 18</b><br>Transporter 2 Printed/Typed Name Signature Month Day Year   |  |  |                            |  |   |                   |                 |                |
| 18. Discrepancy<br>18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection<br>Manifest Reference Number: U.S. EPA ID Number   |  |  |                            |  |   |                   |                 |                |
| 18b. Alternate Facility (or Generator)<br>Facility's Phone: U.S. EPA ID Number  |  |  |                            |  |   |                   |                 |                |
| 18c. Signature of Alternate Facility (or Generator) Month Day Year  |  |  |                            |  |   |                   |                 |                |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)<br>1. <b>H040</b> 2. <b>H040</b> 3. <b>H040</b> 4. <b>H040</b>  |  |  |                            |  |   |                   |                 |                |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a<br>Printed/Typed Name Signature Month Day Year<br><b>Michelle Blackwell</b> <b>Michelle Blackwell</b> <b>17 12 18</b>  |  |  |                            |  |   |                   |                 |                |

|   |  |   |                            |  |                    |                                  |             |             |  |
|---|--|---|----------------------------|--|--------------------|----------------------------------|-------------|-------------|--|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b><br>(Continuation Sheet)           |  | 21. Generator ID Number<br><b>NED981723513</b>  | 22. Page<br><b>2 of 3</b>  | 23. Manifest Tracking Number<br><b>0109851488e</b> |                    |                                  |             |             |  |
| 24. Generator's Name<br><b>Clean Harbors Environmental Services, Inc.</b> |  |   |                            |  |                    |                                  |             |             |  |
| 25. Transporter _____ Company Name  |  |   |                            | U.S. EPA ID Number                                 |                    |                                  |             |             |  |
| 26. Transporter _____ Company Name  |  |   |                            | U.S. EPA ID Number                                 |                    |                                  |             |             |  |
| <b>GENERATOR</b>  | 27a. HM  | 27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 28. Containers<br>No. Type |  | 29. Total Quantity |                                  |             |             |  |
|   |  |   |                            |  | 30. Unit WL/Vol.   |                                  |             |             |  |
|   |  |   |                            |  | 31. Waste Codes    |                                  |             |             |  |
|   | <b>X</b>   | <b>5. UN2924. WASTE FLAMMABLE LIQUIDS, CORROSIVE, N.O.S., (ETHANOL, SODIUM HYDROXIDE), 3, (9), PG III</b>       | <b>001</b>                 | <b>DF</b>  | <b>00060</b>       | <b>P</b>                         | <b>D001</b> | <b>D002</b> |  |
|   | <b>X</b>   | <b>6. UN3254. WASTE TRIBUTYLPHOSPHANE, 4.2, PG I</b>  | <b>001</b>                 | <b>DF</b>  | <b>00009</b>       | <b>P</b>                         | <b>D001</b> |             |  |
|   | <b>X</b>   | <b>7. UN2810. WASTE TOXIC LIQUIDS, ORGANIC, N.O.S., (PHENOL, PYRIDINE), 6.1, PG II</b>                          | <b>001</b>                 | <b>DF</b>  | <b>00255</b>       | <b>P</b>                         | <b>D006</b> | <b>D038</b> |  |
|   | <b>X</b>   | <b>8. UN2811. WASTE TOXIC SOLIDS, ORGANIC, N.O.S., (VINYL CHLORIDE), 6.1, PG II</b>                             | <b>001</b>                 | <b>DF</b>  | <b>00070</b>       | <b>P</b>                         | <b>D043</b> |             |  |
|   | <b>X</b>   | <b>9. UN1588. WASTE CYANIDES, INORGANIC, SOLID, N.O.S., (LAB PACK), 6.1, PG III</b>                             | <b>001</b>                 | <b>DF</b>  | <b>00006</b>       | <b>P</b>                         |             |             |  |
|   | <b>X</b>   | <b>10. UN1789. WASTE HYDROCHLORIC ACID, 8, PG II</b>  | <b>001</b>                 | <b>DF</b>  | <b>00018</b>       | <b>P</b>                         | <b>D002</b> |             |  |
|   | <b>X</b>   | <b>11. UN3266. WASTE CORROSIVE LIQUID, BASIC, INORGANIC, N.O.S., (SEE PACKING LIST), 8, PG II</b>               | <b>002</b>                 | <b>DF</b>  | <b>00026</b>       | <b>P</b>                         | <b>D002</b> |             |  |
|   | <b>X</b>   | <b>12. UN2922. WASTE CORROSIVE LIQUIDS, TOXIC, N.O.S., (HYDROCHLORIC ACID), 8, (6.1), PG II</b>                 | <b>001</b>                 | <b>DF</b>  | <b>00080</b>       | <b>P</b>                         | <b>D002</b> |             |  |
|   | <b>X</b>   | <b>13. UN3265. CORROSIVE LIQUID, ACIDIC, ORGANIC, N.O.S., (SEE PACKING LIST), 8, PG II</b>                      | <b>001</b>                 | <b>DF</b>  | <b>00084</b>       | <b>P</b>                         |             |             |  |
|   | <b>X</b>   | <b>14. UN2672. WASTE AMMONIA SOLUTION, 8, PG III</b>  | <b>001</b>                 | <b>DF</b>  | <b>00009</b>       | <b>P</b>                         | <b>D002</b> |             |  |
|   | 32. Special Handling Instructions and Additional Information<br><b>5. CCRC-ALK-LIQ ERG#132 1X30 9. LCCRB-HAS ERG#157 1X5 13. LCCRC-HH ERG#153 1X30</b><br><b>6. LBCTD-HAS ERG#135 1X5 10. LCCRA-HAS ERG#157 1X5 14. LCCRB-HAS ERG#154 1X5</b><br><b>7. A22K-INT-AIR ERG#153 1X30 11. LCCRB-HAS ERG#154 2X5</b><br><b>8. CCRC-AIR ERG#154 1X55 12. LCCRA-HAS ERG#154 1X30</b> |   |                            |  |                    |                                  |             |             |  |
| <b>TRANSPORTER</b>  | 33. Transporter Acknowledgment of Receipt of Materials   |   | Signature _____            |  |                    | Month _____ Day _____ Year _____ |             |             |  |
|   | 34. Transporter Acknowledgment of Receipt of Materials   |   | Signature _____            |  |                    | Month _____ Day _____ Year _____ |             |             |  |
| <b>DESIGNATED FACILITY</b>  | 35. Discrepancy  |   |                            |  |                    |                                  |             |             |  |
|   | 36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)  |   |                            |  |                    |                                  |             |             |  |
|   | <b>5. H040</b>   | <b>6. H040</b>  | <b>7. H040</b>             | <b>8. H040</b>                                     | <b>9. H040</b>     |                                  |             |             |  |
|   | <b>10. H040</b>  | <b>11. H040</b>   | <b>12. H040</b>            | <b>13. H040</b>                                    | <b>14. H040</b>    |                                  |             |             |  |

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

|  |  |   |                            |  |                    |                   |                 |          |      |
|--|--|---|----------------------------|--|--------------------|-------------------|-----------------|----------|------|
| UNIFORM HAZARDOUS WASTE MANIFEST<br>(Continuation Sheet)   |  | 21. Generator ID Number<br>NED981723513   | 22. Page<br>3 of 3         | 23. Manifest Tracking Number<br>0108851488 |                    |                   |                 |          |      |
| 24. Generator's Name<br>Clean Harbors Environmental Services, Inc.   |  |   |                            |  |                    |                   |                 |          |      |
| 25. Transporter _____ Company Name   |  |   |                            | U.S. EPA ID Number                         |                    |                   |                 |          |      |
| 26. Transporter _____ Company Name   |  |   |                            | U.S. EPA ID Number                         |                    |                   |                 |          |      |
| GENERATOR  | 27a. HM  | 27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 28. Containers<br>No. Type |  | 29. Total Quantity | 30. Unit Wt./Vol. | 31. Waste Codes |          |      |
|  | X  | 15. UN3264, WASTE CORROSIVE LIQUID, ACIDIC, INORGANIC, N.O.S., (POTASSIUM HYDROXIDE), 8, PG III                 | 001                        | CF   | 00041              | P                 | D002            |          |      |
|  | A  | 16. UN3265, WASTE CORROSIVE LIQUID, ACIDIC, ORGANIC, N.O.S., (ACETIC ACID; BENZOIC ACID), 8, PG III             | 001                        | DF   | 00043              | P                 | D123<br>D018    | D001     | D002 |
|  | X  | 17. UN3264, WASTE CORROSIVE LIQUID, ACIDIC, INORGANIC, N.O.S., (SEE PACKING LIST), 8, PG III                    | 001                        | DF   | 00054              | P                 | D002            |          |      |
|  | X  | 18. UN2922, WASTE CORROSIVE LIQUIDS, TOXIC, N.O.S., (ACETONE), 8, (6.1), PG III                                 | 001                        | DF   | 00455              | P                 | D002            | F002     | F003 |
|  | X  | 19. UN3264, WASTE CORROSIVE LIQUID, ACIDIC, INORGANIC, N.O.S., (HYDROCHLORIC ACID), 8, PG III                   | 001                        | DF   | 00114              | P                 | D002            |          |      |
|  |  | 20. NON-RCRA HAZARDOUS WASTE, SOLIDS, (LEAKING NON-PCB CAPACITORS)  | 001                        | DM   | 00334              | P                 |                 |          |      |
|  |  |   |                            |  |                    |                   |                 |          |      |
|  |  |   |                            |  |                    |                   |                 |          |      |
|  |  |   |                            |  |                    |                   |                 |          |      |
| 32. Special Handling Instructions and Additional Information<br>15. LCCR-BAE ERG#154 1X10 19. D20R-INTER ERG#154 1X55<br>16. LCCR-BAE ERG#153 1X16 20. D80Y-INTER 1X55<br>17. LCCR-BAE ERG#154 1X30<br>18. CCRK-ATR ERG#154 1X55 |  |   |                            |  |                    |                   |                 |          |      |
| TRANSPORTER  | 33. Transporter Acknowledgment of Receipt of Materials |   | Signature                  |  | Month              |                   | Day             |          | Yes  |
|  | Printed/Typed Name                                     |   |                            |  |                    |                   |                 |          |      |
| DESIGNATED FACILITY  | 34. Transporter Acknowledgment of Receipt of Materials |   | Signature                  |  | Month              |                   | Day             |          | Yes  |
|  | Printed/Typed Name                                     |   |                            |  |                    |                   |                 |          |      |
| 35. Discrepancy  |  |   |                            |  |                    |                   |                 |          |      |
| 36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)  |  |   |                            |  |                    |                   |                 |          |      |
| 15. H040   |  | 16. H040  |                            | 17. H040                                   |                    | 18. H040          |                 | 19. H040 |      |
| 20. H040   |  |   |                            |  |                    |                   |                 |          |      |





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MANIFEST INFORMATION

|  |                            |
|--|----------------------------|
| Generator : Clean Harbors Environmental Services, Inc. | Manifest Tracking Info.    |
| Address: 2247 South Highway 71<br>Kimball, NE 69145    | 010885148fle               |
| EPA ID #: NED981723513                                 | Sales Order No: 1803512193 |

LINE ITEM INFORMATION

| Line Item:     | Page No: | Profile No: | Treatability Group:        | LDR Disposal Category       |
|----------------|----------|-------------|----------------------------|-----------------------------|
| 1.             | 1        | LCCRD-HAZ   | NON-WASTEWATER             | 2 (This is subject to LDR.) |
| EPA Waste Code |          |             | EPA Waste SubCategory      |                             |
| D001           |          |             | High TOC Ignitable Liquids |                             |
| D002           |          |             | Corrosive Characteristic   |                             |
| D022           |          |             | NONE                       |                             |

LINE ITEM INFORMATION

| Line Item:     | Page No: | Profile No:  | Treatability Group:                 | LDR Disposal Category       |
|----------------|----------|--------------|-------------------------------------|-----------------------------|
| 2.             | 1        | A22K-INT-AIR | NON-WASTEWATER                      | 2 (This is subject to LDR.) |
| EPA Waste Code |          |              | EPA Waste SubCategory               |                             |
| D001           |          |              | Ignitables, except High TOC Liquids |                             |
| D002           |          |              | Corrosive Characteristic            |                             |
| D009           |          |              | Low Mercury, not RMERC Residues     |                             |
| F003           |          |              | NONE                                |                             |

LINE ITEM INFORMATION

| Line Item:     | Page No: | Profile No:   | Treatability Group:                 | LDR Disposal Category       |
|----------------|----------|---------------|-------------------------------------|-----------------------------|
| 3.             | 1        | CCRC-ACID-LIQ | NON-WASTEWATER                      | 2 (This is subject to LDR.) |
| EPA Waste Code |          |               | EPA Waste SubCategory               |                             |
| D001           |          |               | Ignitables, except High TOC Liquids |                             |
| D002           |          |               | Corrosive Characteristic            |                             |
| F002F003       |          |               | NONE                                |                             |

LINE ITEM INFORMATION

| Line Item:     | Page No: | Profile No:  | Treatability Group:                 | LDR Disposal Category       |
|----------------|----------|--------------|-------------------------------------|-----------------------------|
| 4.             | 1        | CCRC-ACID-SL | NON-WASTEWATER                      | 2 (This is subject to LDR.) |
| EPA Waste Code |          |              | EPA Waste SubCategory               |                             |
| D001           |          |              | Ignitables, except High TOC Liquids |                             |
| D002           |          |              | Corrosive Characteristic            |                             |



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LINE ITEM INFORMATION

| Line Item:     | Page No: | Profile No:  | Treatability Group:                 | LDR Disposal Category       |
|----------------|----------|--------------|-------------------------------------|-----------------------------|
| 5.             | 2        | CCRC-ALK-LIQ | NON-WASTEWATER                      | 2 (This is subject to LDR.) |
| EPA Waste Code |          |              | EPA Waste SubCategory               |                             |
| D001           |          |              | Ignitables, except High TOC Liquids |                             |
| D002           |          |              | Corrosive Characteristic            |                             |

LINE ITEM INFORMATION

| Line Item:     | Page No: | Profile No: | Treatability Group:        | LDR Disposal Category           |
|----------------|----------|-------------|----------------------------|---------------------------------|
| 6.             | 2        | LRCTD-HAZ   | NON-WASTEWATER             | 11 (Labpack Alternate Standard) |
| EPA Waste Code |          |             | EPA Waste SubCategory      |                                 |
| D001           |          |             | High TOC Ignitable Liquids |                                 |

LINE ITEM INFORMATION

| Line Item:     | Page No: | Profile No:  | Treatability Group:                 | LDR Disposal Category       |
|----------------|----------|--------------|-------------------------------------|-----------------------------|
| 7.             | 2        | A22K-INT-AIR | NON-WASTEWATER                      | 2 (This is subject to LDR.) |
| EPA Waste Code |          |              | EPA Waste SubCategory               |                             |
| D006           |          |              | Toxicity characteristic for Cadmium |                             |
| D038           |          |              | NONE                                |                             |

LINE ITEM INFORMATION

| Line Item:     | Page No: | Profile No: | Treatability Group:   | LDR Disposal Category       |
|----------------|----------|-------------|-----------------------|-----------------------------|
| 8.             | 2        | CCRK-AIR    | NON-WASTEWATER        | 2 (This is subject to LDR.) |
| EPA Waste Code |          |             | EPA Waste SubCategory |                             |
| D043           |          |             | NONE                  |                             |

LDR Chemical Data

| Chemical                              | Underlying<br>Hazardous<br>Constituents | Constituents<br>of<br>Concern | Contaminants<br>Subject to<br>Treatment |
|---------------------------------------|---|-------------------------------|---|
| 1,1,1-TRICHLOROETHANE                 | N                                       | Y                             | N                                       |
| 1,1,2-TRICHLORO-1,2,2-TRIFLUOROETHANE | N                                       | Y                             | N                                       |
| 1,1-DICHLOROETHANE                    | Y                                       | N                             | N                                       |
| 1,1-DICHLOROETHYLENE                  | Y                                       | N                             | N                                       |
| 1,4-DINITROBENZENE                    | Y                                       | N                             | N                                       |
| 2,4,5-TRICHLOROPHENOL                 | Y                                       | N                             | N                                       |
| 2,4,6-TRICHLOROPHENOL                 | Y                                       | N                             | N                                       |
| 2,4-DINITROTOLUENE                    | Y                                       | N                             | N                                       |
| ACETONE                               | Y                                       | Y                             | N                                       |
| ARSENIC                               | Y                                       | N                             | N                                       |
| BARIUM                                | Y                                       | N                             | N                                       |
| BENZENE                               | Y                                       | Y                             | N                                       |



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|                           |   |   |   |
|---------------------------|---|---|---|
| CADMIUM                   | Y | N | N |
| CARBON DISULFIDE          | N | Y | N |
| CARBON TETRACHLORIDE      | Y | Y | N |
| CHLOROBENZENE             | Y | Y | N |
| CHLOROFORM                | Y | N | N |
| CHROMIUM                  | Y | N | N |
| CRESOL-MIXED ISOMERS      | Y | Y | N |
| CYCLOHEXANONE             | N | Y | N |
| ETHYL ACETATE             | N | Y | N |
| ETHYL BENZENE             | N | Y | N |
| ETHYL ETHER               | N | Y | N |
| HEXACHLOROBENZENE         | Y | N | N |
| HEXACHLOROBUTADIENE       | Y | N | N |
| HEXACHLOROETHANE          | Y | N | N |
| ISOBUTYL ALCOHOL          | N | Y | N |
| LEAD                      | Y | N | N |
| M-CRESOL                  | Y | Y | N |
| MERCURY - ALL OTHERS      | Y | N | N |
| METHANOL                  | N | Y | N |
| METHYL ETHYL KETONE       | Y | Y | N |
| METHYL ISOBUTYL KETONE    | Y | Y | N |
| METHYLENE CHLORIDE        | N | Y | N |
| N-BUTYL ALCOHOL           | N | Y | N |
| NITROBENZENE              | Y | Y | N |
| O-CRESOL                  | Y | Y | N |
| O-DICHLOROBENZENE         | N | Y | N |
| P-CRESOL                  | Y | Y | N |
| PENTACHLOROPHENOL         | Y | N | N |
| PYRIDINE                  | Y | Y | N |
| SELENIUM                  | Y | N | N |
| SILVER                    | Y | N | N |
| TETRACHLOROETHYLENE       | Y | Y | N |
| TOLUENE                   | Y | Y | N |
| TRICHLOROETHYLENE         | Y | Y | N |
| TRICHLOROMONOFUOROMETHANE | N | Y | N |
| VINYL CHLORIDE            | Y | N | N |
| XYLENES (MIXED ISOMERS)   | Y | Y | N |

LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No: | Treatability Group: | LDR Disposal Category       |
|------------|----------|-------------|---------------------|-----------------------------|
| 9.         | 2        | LCCRB-HAZ   | NON-WASTEWATER      | 2 (This is subject to LDR.) |



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ENVIRONMENTAL SERVICES®  
LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No: | Treatability Group: | LDR Disposal Category       |
|------------|----------|-------------|---------------------|-----------------------------|
| 10.        | 2        | LCCRA-HAZ   | NON-WASTEWATER      | 2 (This is subject to LDR.) |

|                |                          |
|----------------|--------------------------|
| EPA Waste Code | EPA Waste SubCategory    |
| D002           | Corrosive Characteristic |

LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No: | Treatability Group: | LDR Disposal Category       |
|------------|----------|-------------|---------------------|-----------------------------|
| 11.        | 2        | LCCRB-HAZ   | NON-WASTEWATER      | 2 (This is subject to LDR.) |

|                |                          |
|----------------|--------------------------|
| EPA Waste Code | EPA Waste SubCategory    |
| D002           | Corrosive Characteristic |

LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No: | Treatability Group: | LDR Disposal Category       |
|------------|----------|-------------|---------------------|-----------------------------|
| 12.        | 2        | LCCRA-HAZ   | NON-WASTEWATER      | 2 (This is subject to LDR.) |

|                |                          |
|----------------|--------------------------|
| EPA Waste Code | EPA Waste SubCategory    |
| D002           | Corrosive Characteristic |

LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No: | Treatability Group: | LDR Disposal Category           |
|------------|----------|-------------|---------------------|---------------------------------|
| 13.        | 2        | LCCRC-NH    | NON-WASTEWATER      | 11 (Labpack Alternate Standard) |

LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No: | Treatability Group: | LDR Disposal Category       |
|------------|----------|-------------|---------------------|-----------------------------|
| 14.        | 2        | LCCRB-HAZ   | NON-WASTEWATER      | 2 (This is subject to LDR.) |

|                |                          |
|----------------|--------------------------|
| EPA Waste Code | EPA Waste SubCategory    |
| D002           | Corrosive Characteristic |

LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No: | Treatability Group: | LDR Disposal Category       |
|------------|----------|-------------|---------------------|-----------------------------|
| 15.        | 3        | LCCRA-HAZ   | NON-WASTEWATER      | 2 (This is subject to LDR.) |

|                |                          |
|----------------|--------------------------|
| EPA Waste Code | EPA Waste SubCategory    |
| D002           | Corrosive Characteristic |

LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No: | Treatability Group: | LDR Disposal Category       |
|------------|----------|-------------|---------------------|-----------------------------|
| 16.        | 3        | LCCRC-HAZ   | NON-WASTEWATER      | 2 (This is subject to LDR.) |

|                |                            |
|----------------|----------------------------|
| EPA Waste Code | EPA Waste SubCategory      |
| D001           | High TOC Ignitable Liquids |
| D002           | Corrosive Characteristic   |



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D018U123

NONE

LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No: | Treatability Group: | LDR Disposal Category       |
|------------|----------|-------------|---------------------|-----------------------------|
| 17.        | 3        | LCCRA-HAZ   | NON-WASTEWATER      | 2 (This is subject to LDR.) |

EPA Waste Code

D002

EPA Waste SubCategory

Corrosive Characteristic

LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No: | Treatability Group: | LDR Disposal Category       |
|------------|----------|-------------|---------------------|-----------------------------|
| 18.        | 3        | CCRK-AIR.   | NON-WASTEWATER      | 2 (This is subject to LDR.) |

EPA Waste Code

D002

EPA Waste SubCategory

Corrosive Characteristic



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F002F003

NONE

LDR Chemical Data

| Chemical                              | Underlying<br>Hazardous<br>Constituents | Constituents<br>of<br>Concern | Contaminants<br>Subject to<br>Treatment |
|---------------------------------------|---|-------------------------------|---|
| 1,1,1-TRICHLOROETHANE                 | N                                       | Y                             | N                                       |
| 1,1,2-TRICHLORO-1,2,2-TRIFLUOROETHANE | N                                       | Y                             | N                                       |
| 1,1-DICHLOROETHANE                    | Y                                       | N                             | N                                       |
| 1,1-DICHLOROETHYLENE                  | Y                                       | N                             | N                                       |
| 1,4-DINITROBENZENE                    | Y                                       | N                             | N                                       |
| 2,4,5-TRICHLOROPHENOL                 | Y                                       | N                             | N                                       |
| 2,4,6-TRICHLOROPHENOL                 | Y                                       | N                             | N                                       |
| 2,4-DINITROTOLUENE                    | Y                                       | N                             | N                                       |
| ACETONE                               | Y                                       | Y                             | N                                       |
| ARSENIC                               | Y                                       | N                             | N                                       |
| BARIUM                                | Y                                       | N                             | N                                       |
| BENZENE                               | Y                                       | Y                             | N                                       |
| CADMIUM                               | Y                                       | N                             | N                                       |
| CARBON DISULFIDE                      | N                                       | Y                             | N                                       |
| CARBON TETRACHLORIDE                  | Y                                       | Y                             | N                                       |
| CHLOROBENZENE                         | Y                                       | Y                             | N                                       |
| CHLOROFORM                            | Y                                       | N                             | N                                       |
| CHROMIUM                              | Y                                       | N                             | N                                       |
| CRESOL-MIXED ISOMERS                  | Y                                       | Y                             | N                                       |
| CYCLOHEXANONE                         | N                                       | Y                             | N                                       |
| ETHYL ACETATE                         | N                                       | Y                             | N                                       |
| ETHYL BENZENE                         | N                                       | Y                             | N                                       |
| ETHYL ETHER                           | N                                       | Y                             | N                                       |
| HEXACHLOROBENZENE                     | Y                                       | N                             | N                                       |
| HEXACHLOROBUTADIENE                   | Y                                       | N                             | N                                       |
| HEXACHLOROETHANE                      | Y                                       | N                             | N                                       |
| ISOBUTYL ALCOHOL                      | N                                       | Y                             | N                                       |
| LEAD                                  | Y                                       | N                             | N                                       |
| M-CRESOL                              | Y                                       | Y                             | N                                       |
| MERCURY - ALL OTHERS                  | Y                                       | N                             | N                                       |
| METHANOL                              | N                                       | Y                             | N                                       |
| METHYL ETHYL KETONE                   | Y                                       | Y                             | N                                       |
| METHYL ISOBUTYL KETONE                | Y                                       | Y                             | N                                       |
| METHYLENE CHLORIDE                    | N                                       | Y                             | N                                       |
| N-BUTYL ALCOHOL                       | N                                       | Y                             | N                                       |
| NITROBENZENE                          | Y                                       | Y                             | N                                       |
| O-CRESOL                              | Y                                       | Y                             | N                                       |
| O-DICHLOROBENZENE                     | N                                       | Y                             | N                                       |



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|                           |   |   |   |
|---------------------------|---|---|---|
| P-CRESOL                  | Y | Y | N |
| PENTACHLOROPHENOL         | Y | N | N |
| PYRIDINE                  | Y | Y | N |
| SELENIUM                  | Y | N | N |
| SILVER                    | Y | N | N |
| TETRACHLOROETHYLENE       | Y | Y | N |
| TOLUENE                   | Y | Y | N |
| TRICHLOROETHYLENE         | Y | Y | N |
| TRICHLOROMONOFUOROMETHANE | N | Y | N |
| VINYL CHLORIDE            | Y | N | N |
| XYLENES (MIXED ISOMERS)   | Y | Y | N |

LINE ITEM INFORMATION

| Line Item:     | Page No: | Profile No:              | Treatability Group: | LDR Disposal Category       |
|----------------|----------|--------------------------|---------------------|-----------------------------|
| 19.            | 3        | D20R-INTER               | NON-WASTEWATER      | 2 (This is subject to LDR.) |
| EPA Waste Code |          | EPA Waste SubCategory    |                     |                             |
| D002           |          | Corrosive Characteristic |                     |                             |

Certification

Applies to  
Manifest Line  
Items

Pursuant to 40 CFR 268.7(a), I hereby notify that this shipment contains waste restricted under 40 CFR Part 268.

1. 2. 3. 4.  
5. 7. 8. 9.  
10. 11. 12.  
14. 15. 16.  
17. 18. 19.

This waste is not restricted as specified in 40 CFR 268 Subpart D.

20.

This labpack is subject to the treatment standards specified in 40 CFR 268 Subpart D. I certify under penalty of law that I personally have examined and am familiar with the waste and that the lab pack contains only wastes that have not been excluded under appendix IV to 40 CFR part 268 and that this lab pack will be sent to a combustion facility in compliance with the alternative treatment standards for lab packs at 40 CFR 268.42(c). I am aware that there are significant penalties for submitting a false certification, including the possibility of fine or imprisonment.

6. 13.

Waste analysis data, where available, is attached.

Signature: [Signature] Print Name: Justin Brown for CHS  
Title: Foreman Date: 07/11/18

**Attachment 3**

**Outbound Manifest 013261800FLE**

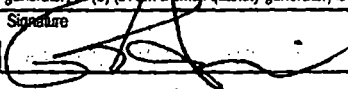


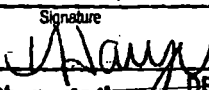


KP 1900369787

SC PPW 7/12/2018

Form Approved. OMB No. 2050-0039

Please print or type.

|   |   |  |                            |  |   |                                   |                 |      |      |
|---|---|--|----------------------------|--|---|-----------------------------------|-----------------|------|------|
| UNIFORM HAZARDOUS WASTE MANIFEST  |   | 1. Generator ID Number<br><b>NE D 9 8 1 7 2 3 5 1 3</b>  | 2. Page 1 of<br><b>3</b>   | 3. Emergency Response Phone<br><b>(800) 483-3718</b> | 4. Manifest Tracking Number<br><b>013261800 FLE</b> |                                   |                 |      |      |
| 5. Generator's Name and Mailing Address<br><b>Clean Harbors Environmental Services, Inc.</b><br><b>2247 South Highway 71</b><br><b>Kimball, NE 68148</b>  |   | Generator's Site Address (if different than mailing address)<br><b>SAME</b>  |                            |  |   |                                   |                 |      |      |
| Generator's Phone:<br><b>(308) 238-4012</b>   |   |  |                            |  |   |                                   |                 |      |      |
| 6. Transporter 1 Company Name<br><b>Clean Harbors Environmental Services</b>  |   | U.S. EPA ID Number<br><b>MA D 039322250</b>  |                            |  |   |                                   |                 |      |      |
| 7. Transporter 2 Company Name<br><b>Clean Harbors Environmental Services, INC</b>   |   | U.S. EPA ID Number<br><b>MA D 039322250</b>  |                            |  |   |                                   |                 |      |      |
| 8. Designated Facility Name and Site Address<br><b>Clean Harbors Aragonite LLC</b><br><b>11800 North Aptus Road</b><br><b>Grantsville, UT 84029</b>   |   | U.S. EPA ID Number<br><b>UT D 981552177</b>  |                            |  |   |                                   |                 |      |      |
| Facility's Phone:<br><b>(435) 884-8100</b>  |   |  |                            |  |   |                                   |                 |      |      |
| GENERATOR   | 9a. HM  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))                 | 10. Containers<br>No. Type |  | 11. Total Quantity                                  | 12. Unit Wt./Vol.                 | 13. Waste Codes |      |      |
|   | X   | 1. UN3208, WASTE ALKALI METAL ALCOHOLATES, SELF-HEATING, CORROSIVE, N.O.S., (LABPACK, POTASSIUM METHOXIDE), 4.2, (8), PG II    | 001                        | DF   | 00005   | P                                 | D001            | D002 | D003 |
|   | X   | 2. UN3088, WASTE SELF-HEATING SOLID, ORGANIC, N.O.S., (SPENT ACTIVATED CARBON), 4.2, PG II                                     | 015                        | DM   | 05784   | P                                 | P001            | P022 | P075 |
|   |   |  |                            |  |   |                                   | U001            | U002 | F999 |
|   | X   | 3. UN3129, WASTE WATER-REACTIVE LIQUID, CORROSIVE, N.O.S., (LABPACK, SODIUM BOROHYDRIDE, SODIUM TERT-BUTOXIDE), 4.3, (8), PG I | 001                        | DF   | 00008   | P                                 | D001            | D002 | D003 |
| X   | 4. UN2988, WASTE CHLOROSILANES, WATER-REACTIVE, FLAMMABLE, CORROSIVE, N.O.S., (LABPACK, TOLUENE, DICHLORODIMETHYLSILANE), 4.3, (9), (8), PG I   | 001  | DM                         | 00033  | P   | D001                              | D002            | D003 |      |
|   |   |  |                            |  |   |                                   | F006            |      |      |
| 14. Special Handling Instructions and Additional Information<br>1. IBCD-HAS EPC 138 1X3<br>2. CCRS-INTER EPC 138 15X38<br>3. IBCD-HAS EPC 138 1X3<br>4. IBCD-HAS EPC 138 1X3<br>Contract retained by generator or consignee authority on initial transporter to add or substitute additional transporters on generator's behalf   |   |  |                            |  |   |                                   |                 |      |      |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. |   |  |                            |  |   |                                   |                 |      |      |
| Generator's/Officer's Printed/Typed Name<br><b>Ross Aemi FOR CHES</b>   |   | Signature<br>                              |                            |  |   | Month Day Year<br><b>01 21 19</b> |                 |      |      |
| TRANSPORTER INTL  | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____  |  |                            |  |   |                                   |                 |      |      |
|   | 17. Transporter Acknowledgment of Receipt of Materials<br>Transporter 1 Printed/Typed Name<br><b>Richard Monalova</b> Signature<br> Month Day Year<br><b>11 31 19</b><br>Transporter 2 Printed/Typed Name<br><b>P. James Baldwin</b> Signature<br> Month Day Year<br><b>12 1 19</b> |  |                            |  |   |                                   |                 |      |      |
|   | 18. Discrepancy<br>18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection<br>Manifest Reference Number: _____  |  |                            |  |   |                                   |                 |      |      |
| DESIGNATED FACILITY   | 18b. Alternate Facility (or Generator) U.S. EPA ID Number _____   |  |                            |  |   |                                   |                 |      |      |
|   | Facility's Phone: _____   |  |                            |  |   |                                   |                 |      |      |
|   | 18c. Signature of Alternate Facility (or Generator) _____ Month Day Year _____  |  |                            |  |   |                                   |                 |      |      |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)   |   |  |                            |  |   |                                   |                 |      |      |
| 1. <b>H040</b>  |   | 2. <b>H040</b>   |                            | 3. <b>H040</b>                                       |   | 4. <b>H040</b>                    |                 |      |      |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a  |   |  |                            |  |   |                                   |                 |      |      |
| Printed/Typed Name<br><b>Haley Link</b>   |   | Signature<br>                              |                            |  |   | Month Day Year<br><b>12 17 19</b> |                 |      |      |

| UNIFORM HAZARDOUS WASTE MANIFEST<br>(Continuation Sheet)   |   | 21. Generator ID Number<br><b>NED981723513</b>   | 22. Page<br><b>2 of 3</b> | 23. Manifest Tracking Number<br><b>0132618009E</b> |                  |                       |
|--|---|--|---------------------------|--|------------------|-----------------------|
| 24. Generator's Name<br><b>Clean Harbors Environmental Services, Inc.</b>  |   |  |                           |  |                  |                       |
| 25. Transporter _____ Company Name   |   |  |                           | U.S. EPA ID Number                                 |                  |                       |
| 26. Transporter _____ Company Name   |   |  |                           | U.S. EPA ID Number                                 |                  |                       |
| 27a. HM  | 27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))                     | 28. Containers<br>No. Type                       |                           | 29. Total Quantity                                 | 30. Unit WL/Vol. | 31. Waste Codes       |
| X  | <b>6. UN1479, WASTE OXIDIZING SOLID, N.O.S., (POTASSIUM NITRATE, SILVER NITRATE), 5.1, PG II</b>                                    | <b>002</b>                                       | <b>DF</b>                 | <b>00007</b>                                       | <b>P</b>         | <b>D001 D011</b>      |
| X  | <b>6. UN3098, WASTE OXIDIZING LIQUID, TOXIC, N.O.S., (LABPACK, POTASSIUM DICHROMATE, POTASSIUM PERMANGANATE), 5.1, (6.1), PG II</b> | <b>001</b>                                       | <b>DF</b>                 | <b>00047</b>                                       | <b>P</b>         | <b>D001 D005 D007</b> |
| X  | <b>7. UN3149, WASTE HYDROGEN PEROXIDE AND PEROXYACETIC ACID MIXTURES, STABILIZED, (LABPACK), 5.1, (8), PG II</b>                    | <b>002</b>                                       | <b>DF</b>                 | <b>00135</b>                                       | <b>P</b>         | <b>D001 D002</b>      |
| X  | <b>8. UN3098, OXIDIZING LIQUID, CORROSIVE, N.O.S., (LABPACK), 5.1, (8), PG II</b>   | <b>001</b>                                       | <b>DF</b>                 | <b>00008</b>                                       | <b>P</b>         |                       |
| X  | <b>9. UN1479, OXIDIZING SOLID, N.O.S., (LABPACK), 5.1, PG II</b>  | <b>002</b>                                       | <b>DF</b>                 | <b>00066</b>                                       | <b>P</b>         |                       |
| X  | <b>10. UN3139, OXIDIZING LIQUID, N.O.S., (LABPACK, CHLORINE, HYDROGEN PEROXIDE), 5.1, PG II</b>                                     | <b>008</b>                                       | <b>DF</b>                 | <b>01176</b>                                       | <b>P</b>         |                       |
| X  | <b>11. UN1479, OXIDIZING SOLID, N.O.S., (LABPACK, CHLORINE), 5.1, PG II</b>   | <b>005</b>                                       | <b>DM</b>                 | <b>00790</b>                                       | <b>P</b>         |                       |
| X  | <b>12. UN3105, ORGANIC PEROXIDE TYPE D, LIQUID, (LABPACK, METHYL ETHYL KEYTONE PEROXIDE), 5.2, PG II</b>                            | <b>001</b>                                       | <b>DF</b>                 | <b>00007</b>                                       | <b>P</b>         |                       |
| X  | <b>13. UN1092, WASTE ACROLEIN, STABILIZED, (LABPACK), 6.1, (3), PG I</b>  | <b>005</b>                                       | <b>CF</b>                 | <b>00025</b>                                       | <b>P</b>         | <b>P009</b>           |
| X  | <b>14. UN3018, ORGANOPHOSPHORUS PESTICIDES, LIQUID, TOXIC, (DICHLORVOS), 6.1, PG III</b>  | <b>001</b>                                       | <b>DF</b>                 | <b>00264</b>                                       | <b>P</b>         |                       |
| 32. Special Handling Instructions and Additional Information<br><b>5. CAXI-SOLIDS ERG#140 2X5 9. LCCRO-NH ERG#140 2X16 13. LCCRN009-Inter ERG#131 5</b><br><b>6. LCCRO-NAS ERG#142 1X16 10. LCCRO-NH ERG#140 8X55 14. D90K-INTER-NH ERG#152 1</b><br><b>7. LCCRO-NAS ERG#140 1X55, 1X30 11. LCCRO-NH ERG#140 5X55</b><br><b>8. LCCRO-NH ERG#140 1X5 12. LCCRO-NH ERG#145 1X5</b> |   |  |                           |  |                  |                       |
| 33. Transporter Acknowledgment of Receipt of Materials   |   | Signature _____ Month _____ Day _____ Year _____ |                           |  |                  |                       |
| 34. Transporter Acknowledgment of Receipt of Materials   |   | Signature _____ Month _____ Day _____ Year _____ |                           |  |                  |                       |
| 35. Discrepancy  |   |  |                           |  |                  |                       |
| 36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)  |   |  |                           |  |                  |                       |
| <b>5. H040</b>   |   | <b>6. H040</b>                                   |                           | <b>7. H040</b>                                     |                  | <b>8. H040</b>        |
| <b>10. H040</b>  |   | <b>11. H040</b>                                  |                           | <b>12. H040</b>                                    |                  | <b>13. H040</b>       |
|  |   |  |                           |  |                  | <b>14. H040</b>       |

|   |   |  |                           |   |                     |                 |
|---|---|--|---------------------------|---|---------------------|-----------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b><br>(Continuation Sheet)   |   | 21. Generator ID Number<br><b>NED981723513</b> | 22. Page<br><b>3 of 3</b> | 23. Manifest Tracking Number<br><b>013261800ELE</b> |                     |                 |
| 24. Generator's Name<br><b>Clean Harbors Environmental Services, Inc.</b>   |   |  |                           |   |                     |                 |
| 25. Transporter _____ Company Name  |   |  |                           | U.S. EPA ID Number                                  |                     |                 |
| 26. Transporter _____ Company Name  |   |  |                           | U.S. EPA ID Number                                  |                     |                 |
| 27a.<br>HM  | 27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))           | 28. Containers<br>No. Type                     |                           | 29. Total<br>Quantity                               | 30. Unit<br>WL/Vol. | 31. Waste Codes |
| <b>X</b>  | <b>15. UN1908. WASTE CHLORITE SOLUTION. (LABPACK.1. 8. PG II</b>  | <b>001</b>                                     | <b>DF</b>                 | <b>00046</b>  | <b>P</b>            | <b>D002</b>     |
| <b>X</b>  | <b>16. UN3093, CORROSIVE LIQUIDS, OXIDIZING, N.O.S., (LABPACK SODIUM HYDROXIDE, SODIUM HYPOCHLORITE), 8, (5.1), PG II</b> | <b>002</b>                                     | <b>DF</b>                 | <b>00310</b>  | <b>P</b>            |                 |
| <b>X</b>  | <b>17. UN3093, CORROSIVE LIQUIDS, OXIDIZING, N.O.S., (LABPACK HYPOCHLORITE SOLUTION), 8, (5.1), PG II</b>                 | <b>002</b>                                     | <b>DF</b>                 | <b>00311</b>  | <b>P</b>            |                 |
|   |   |  |                           |   |                     |                 |
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|   |   |  |                           |   |                     |                 |
| 32. Special Handling Instructions and Additional Information<br><b>15. ICCRC-HAN ERG#154 1X16</b><br><b>16. ICCRB-NH ERG#140 2X55</b><br><b>17. ICCRO-NH ERG#140 2X55</b>       |   |  |                           |   |                     |                 |
| 33. Transporter _____ Acknowledgment of Receipt of Materials<br>Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____                                       |   |  |                           |   |                     |                 |
| 34. Transporter _____ Acknowledgment of Receipt of Materials<br>Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____                                       |   |  |                           |   |                     |                 |
| 35. Discrepancy _____   |   |  |                           |   |                     |                 |
| 36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)<br><b>15 H040</b> <b>16 H040</b> <b>17 H040</b> |   |  |                           |   |                     |                 |

# Clean Harbors Manifest Addendum

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Generator ID Number:

Sales Order Number:

N E D 9 8 1 7 2 3 5 1 3

013261800FLE

1900360787

Clean Harbors Environmental Services, Inc.

2247 South Highway 71

Kimball, NE69145

2. CCRKS-INTER

U003 U004 U005  
U006 U007 U008  
U009 U010 U011  
U012 U014 U015  
U016 U017 U018  
U019 U020 U021  
U022 U023 U024  
U025 U026 U027  
U028 U029 U030  
U031 U032 U033  
U034 U035 U036  
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# Clean Harbors Manifest Addendum

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|  | U394 U395 U404 |
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|  | F038 F039 K001 |
|  | K002 K003 K004 |
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# Clean Harbors Manifest Addendum

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|  |                | K039 K040 K041<br>K042 K043 K044   |
|  |                | K045 K046 K047<br>K048 K049 K050<br>K051 K052 K060<br>K061 K062 K064<br>K065 K066 K069<br>K071 K073 K083<br>K084 K085 K086<br>K087 K088 K093<br>K094 K095 K096<br>K097 K098 K099<br>K100 K101 K102   |
|  |                | K103 K104 K105<br>K106 K107 K108<br>K109 K110 K111<br>K112 K113 K114<br>K115 K116 K117<br>K118 K123 K124<br>K125 K126 K131<br>K132 K136 K141<br>K142 K143 K144<br>K145 K147 K148<br>K149 K150 K151<br>K156 K157 K158<br>K159 K161 K169<br>K170 K171 K172 |
|  | CH Container # | Customer Container #   |



ENVIRONMENTAL SERVICES

MANIFEST INFORMATION

Land Disposal Restriction  
Notification Form

Page : 1 of 5

Printed Date : Jan 21, 2019

Generator : Clean Harbors Environmental Services, Inc.

Address: 2247 South Highway 71  
Kimball, NE 69145

EPA ID #: NED981723513

Manifest Tracking Info.

013261800FLE

Sales Order No: 1900369787

LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No: | Treatability Group: | LDR Disposal Category           |
|------------|----------|-------------|---------------------|---------------------------------|
| 1.         | 1        | LRCTD-HAZ   | NON-WASTEWATER      | 11 (Labpack Alternate Standard) |

| EPA Waste Code | EPA Waste SubCategory      |
|----------------|----------------------------|
| D001           | High TOC Ignitable Liquids |
| D002           | Corrosive Characteristic   |
| D003           | Other reactives            |

LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No: | Treatability Group: | LDR Disposal Category       |
|------------|----------|-------------|---------------------|-----------------------------|
| 2.         | 1        | CCRKS-INTER | NON-WASTEWATER      | 2 (This is subject to LDR.) |

| EPA Waste Code | EPA Waste SubCategory                                |
|----------------|--|
| D001           | High TOC Ignitable Liquids                           |
| D002           | Corrosive Characteristic                             |
| D004           | Toxicity Characteristic for Arsenic                  |
| D005           | Toxicity Characteristic for Barium                   |
| D006           | Toxicity characteristic for Cadmium                  |
| D007           | Toxicity Characteristic for Chromium                 |
| D008           | Toxicity Characteristic for Lead                     |
| D010           | Toxicity Characteristic for Selenium                 |
| D011           | Toxicity Characteristic for Silver                   |
| F025           | Light Ends Subcategory                               |
| K006           | Anhydrous Subcategory                                |
| K069           | Low Lead Subcategory                                 |
| K071           | Non-wastewaters, not residues from RMERC             |
| K106           | Non-wastewater, Low Mercury, not residues from RMERC |



Land Disposal Restriction  
Notification Form

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Printed Date : Jan 21, 2019

D012D013D014D015D016D017D018D019D020D021D022D023D024D025D026D027D028D029D030D031D032D033D034D035D036D037D038D039D040D041D042F001F002F003F004F005F006F008F019F024F032F034F035F037F038F039K001K002K003K004K005K007K008K009K010K011K013K014K015K016K017K018K019K020K021K022K023K024K025K026K027K028K029K030K031K032K033K034K035K036K037K038K039K040K041K042K043K044K045K046K047K048K049K050K051K052K060K061K062K064K065K066K073K083K084K085K086K087K088K093K094K095K096K097K098K099K100K101K102K103K104K105K107K108K109K110K111K112K113K114K115K116K117K118K119K120K121K122K123K124K125K126K127K128K129K130K131K132K133K134K135K136K137K138K139K140K141K142K143K144K145K146K147K148K149K150K151K152K153K154K155K156K157K158K159K160K161K162K163K164K165K166K167K168K169K170K171K172K173K174K175K176K177K178K179K180K181K182K183K184K185K186K187K188K189K190K191K192K193K194K195K196K197K198K199K200K201K202K203K204K205K206K207K208K209K210K211K212K213K214K215K216K217K218K219K220K221K222K223K224K225K226K227K228K229K230K231K232K233K234K235K236K237K238K239K240K241K242K243K244K245K246K247K248K249K250K251K252K253K254K255K256K257K258K259K260K261K262K263K264K265K266K267K268K269K270K271K272K273K274K275K276K277K278K279K280K281K282K283K284K285K286K287K288K289K290K291K292K293K294K295K296K297K298K299K300K301K302K303K304K305K306K307K308K309K310K311K312K313K314K315K316K317K318K319K320K321K322K323K324K325K326K327K328K329K330K331K332K333K334K335K336K337K338K339K340K341K342K343K344K345K346K347K348K349K350K351K352K353K354K355K356K357K358K359K360K361K362K363K364K365K366K367K368K369K370K371K372K373K374K375K376K377K378K379K380K381K382K383K384K385K386K387K388K389K390K391K392K393K394K395K396K397K398K399K400K401K402K403K404K405K406K407K408K409K410K411

LINE ITEM INFORMATION

| Line Item:     | Page No: | Profile No: | Treatability Group:        | LDR Disposal Category           |
|----------------|----------|-------------|----------------------------|---------------------------------|
| 3.             | 1        | LRCTD-HAZ   | NON-WASTEWATER             | 11 (Labpack Alternate Standard) |
| EPA Waste Code |          |             | EPA Waste SubCategory      |                                 |
| D001           |          |             | High TOC Ignitable Liquids |                                 |
| D002           |          |             | Corrosive Characteristic   |                                 |
| D003           |          |             | Other reactives            |                                 |

LINE ITEM INFORMATION

| Line Item:     | Page No: | Profile No: | Treatability Group:        | LDR Disposal Category           |
|----------------|----------|-------------|----------------------------|---------------------------------|
| 4.             | 1        | LRCTD-HAZ   | NON-WASTEWATER             | 11 (Labpack Alternate Standard) |
| EPA Waste Code |          |             | EPA Waste SubCategory      |                                 |
| D001           |          |             | High TOC Ignitable Liquids |                                 |
| D002           |          |             | Corrosive Characteristic   |                                 |
| D003           |          |             | Other reactives            |                                 |
| F005           |          |             | NONE                       |                                 |





Land Disposal Restriction  
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LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No: | Treatability Group: | LDR Disposal Category       |
|------------|----------|-------------|---------------------|-----------------------------|
| 5.         | 2        | CAXI-SOLIDS | NON-WASTEWATER      | 2 (This is subject to LDR.) |

| EPA Waste Code | EPA Waste SubCategory               |
|----------------|-------------------------------------|
| D001           | Ignitables, except High TOC Liquids |
| D011           | Toxicity Characteristic for Silver  |

LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No: | Treatability Group: | LDR Disposal Category       |
|------------|----------|-------------|---------------------|-----------------------------|
| 6.         | 2        | LCCRO-HAZ   | NON-WASTEWATER      | 2 (This is subject to LDR.) |

| EPA Waste Code | EPA Waste SubCategory                |
|----------------|--------------------------------------|
| D001           | Ignitables, except High TOC Liquids  |
| D005           | Toxicity Characteristic for Barium   |
| D007           | Toxicity Characteristic for Chromium |

LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No: | Treatability Group: | LDR Disposal Category       |
|------------|----------|-------------|---------------------|-----------------------------|
| 7.         | 2        | LCCRO-HAZ   | NON-WASTEWATER      | 2 (This is subject to LDR.) |

| EPA Waste Code | EPA Waste SubCategory               |
|----------------|-------------------------------------|
| D001           | Ignitables, except High TOC Liquids |
| D002           | Corrosive Characteristic            |

LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No: | Treatability Group: | LDR Disposal Category           |
|------------|----------|-------------|---------------------|---------------------------------|
| 8.         | 2        | LCCRO-NH    | NON-WASTEWATER      | 11 (Labpack Alternate Standard) |

LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No: | Treatability Group: | LDR Disposal Category           |
|------------|----------|-------------|---------------------|---------------------------------|
| 9.         | 2        | LCCRO-NH    | NON-WASTEWATER      | 11 (Labpack Alternate Standard) |

LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No: | Treatability Group: | LDR Disposal Category           |
|------------|----------|-------------|---------------------|---------------------------------|
| 10.        | 2        | LCCRO-NH    | NON-WASTEWATER      | 11 (Labpack Alternate Standard) |

LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No: | Treatability Group: | LDR Disposal Category           |
|------------|----------|-------------|---------------------|---------------------------------|
| 11.        | 2        | LCCRO-NH    | NON-WASTEWATER      | 11 (Labpack Alternate Standard) |



Land Disposal Restriction  
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LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No: | Treatability Group: | LDR Disposal Category           |
|------------|----------|-------------|---------------------|---------------------------------|
| 12.        | 2        | LRCTO-NH    | NON-WASTEWATER      | 11 (Labpack Alternate Standard) |

LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No:     | Treatability Group: | LDR Disposal Category       |
|------------|----------|-----------------|---------------------|-----------------------------|
| 13.        | 2        | LCCRIP009-INTER | NON-WASTEWATER      | 2 (This is subject to LDR.) |

| EPA Waste Code | EPA Waste SubCategory |
|----------------|-----------------------|
| P009           | NONE                  |

LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No:   | Treatability Group: | LDR Disposal Category       |
|------------|----------|---------------|---------------------|-----------------------------|
| 14.        | 2        | D90K-INTER-NH | NON-WASTEWATER      | 2 (This is subject to LDR.) |

LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No: | Treatability Group: | LDR Disposal Category       |
|------------|----------|-------------|---------------------|-----------------------------|
| 15.        | 3        | LCCRC-HAZ   | NON-WASTEWATER      | 2 (This is subject to LDR.) |

| EPA Waste Code | EPA Waste SubCategory    |
|----------------|--------------------------|
| D002           | Corrosive Characteristic |

LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No: | Treatability Group: | LDR Disposal Category           |
|------------|----------|-------------|---------------------|---------------------------------|
| 16.        | 3        | LCCRB-NH    | NON-WASTEWATER      | 11 (Labpack Alternate Standard) |

LINE ITEM INFORMATION

| Line Item: | Page No: | Profile No: | Treatability Group: | LDR Disposal Category           |
|------------|----------|-------------|---------------------|---------------------------------|
| 17.        | 3        | LCCRO-NH    | NON-WASTEWATER      | 11 (Labpack Alternate Standard) |



Land Disposal Restriction  
Notification Form

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Printed Date : Jan 21, 2019

Certification

Applies to  
Manifest Line  
Items

This labpack is subject to the treatment standards specified in 40 CFR 268 Subpart D. I certify under penalty of law that I personally have examined and am familiar with the waste and that the lab pack contains only wastes that have not been excluded under appendix IV to 40 CFR part 268 and that this lab pack will be sent to a combustion facility in compliance with the alternative treatment standards for lab packs at 40 CFR 268.42(c). I am aware that there are significant penalties for submitting a false certification, including the possibility of fine or imprisonment.

1. 3. 4. 8.  
9. 10. 11. 12.  
16. 17.

Pursuant to 40 CFR 268.7(a), I hereby notify that this shipment contains waste restricted under 40 CFR Part 268.

2. 5. 6. 7.  
13. 14. 15.

Waste analysis data, where available, is attached.

Signature :

Print Name

Ross Hemi Fir GUESL

Title :

Facility Foreman

Date :

1-21-19

Clean Harbors CleanPack Cont. Profile: LCCRI

LCCRI

Sales Order Task #: 1804194048-001 Date: 08/24/2018

67988012



Created By: 311212

Customer LP #:

Profile: LCCRI

Labpack Comment:

| GENERATOR           |   | DESIGNATED FACILITY |  |
|---------------------|---|---------------------|--|
| Generator Code:     | KA000001  | Facility Code:      | KP   |
| Generator EPA ID #: | SD080632772                                       | Facility EPA ID #:  | NED981723513                               |
| Generator Name:     | Kansas State University                           | Facility Name:      | Clean Harbors Environmental Services Inc.  |
| Address:            | 2016 Agronomy Central Road<br>Manhattan, KS 66502 | Address:            | 2247 South Highway 71<br>Kimball, NE 69145 |
| Phone:              | (785) 532-5856                                    | Phone:              | (308) 235-4012                             |

MANIFEST

Manifest Tracking #: 112286127FLE Container Type/Description: PBIF Phi Fiber Box  
 Manifest Page #: 1  
 Manifest Line #: 1 Shipping Quantity: 1 Pounds  
 DOT Shipping Name: JN1092, WASTE ACROLEIN, STABILIZED, 6.1, (3), PG I, TOXIC-INHALATION HAZARD ZONE A

| CrstItem # | Item #    | Substance          | Waste Codes | Qty            | Size | LS/G   |
|------------|-----------|--------------------|-------------|----------------|------|--------|
|            | 000004338 | Acrolein (100.00%) | P009        | 50 Milliliters |      | Liquid |

**Attachment 4**

**Inbound Manifest 010923766JJK**

V18110048

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

|   |  |  |   |   |  |                   |                                  |
|---|--|--|---|---|--|-------------------|----------------------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br>CO6213820725   | 2. Page 1 of<br>6                         | 3. Emergency Response Phone<br>(719) 549-4999 | 4. Manifest Tracking Number<br><b>010923766 JJK</b>          |                   |                                  |
| 5. Generator's Name and Mailing Address<br><b>PUEBLO CHEMICAL DEPOT<br/>45825 HIGHWAY 96 EAST ATTN: PSB<br/>PUEBLO, CO 81006 UNITED STATES</b><br>Generator's Phone: <b>719-549-5678</b>  |  |  |   |   | Generator's Site Address (if different than mailing address) |                   |                                  |
| 6. Transporter 1 Company Name<br><b>CLEAN HARBORS ENVIROMENTAL SERVICE</b>  |  |  |   |   | U.S. EPA ID Number<br><b>MAD0038322280</b>                   |                   |                                  |
| 7. Transporter 2 Company Name   |  |  |   |   | U.S. EPA ID Number   |                   |                                  |
| 8. Designated Facility Name and Site Address<br><b>CLEAN HARBORS ENVIRONMENTAL SERVICES INC.<br/>2247 SOUTH HIGHWAY 71<br/>KIMBALL, NE 68145 UNITED STATES</b><br>Facility's Phone: <b>308-235-8200</b>   |  |  |   |   | U.S. EPA ID Number<br><b>NED881723513</b>                    |                   |                                  |
| GENERATOR   | 9a. HM   | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers<br>No. Type                |   | 11. Total Quantity   | 12. Unit Wt./Vol. | 13. Waste Codes                  |
|   | X  | 1. UN2811, WASTE TOXIC SOLIDS, ORGANIC, N.O.S. (VINYL CHLORIDE), 6.1, II, 154                                  | 1   | DF  | 46   | P                 | D043 K903                        |
|   | X  | 2. UN2811, WASTE TOXIC SOLIDS, ORGANIC, N.O.S. (VINYL CHLORIDE, LEAD), 6.1, II, 154                            | 1   | DF  | 29   | P                 | D004 D005 D007<br>D008 D011 D043 |
|   | X  | 3. UN1983, WASTE FLAMMABLE LIQUIDS, N.O.S. (ACETONE, TETRAHYDROFURAN), 3, II, 128                              | 1   | DF  | 11   | P                 | D001 D035 U057<br>U002 U159 U213 |
|   | X  | 4. UN2924, WASTE FLAMMABLE LIQUID, CORROSIVE, N.O.S. (ACETONE, SODIUM HYDROXIDE), 3, (8), II, 132              | 1   | DF  | 8  | P                 | D018 D027 U154<br>D001 D002 U002 |
| 14. Special Handling Instructions and Additional Information<br>1:WPR131230_001 1X55DF, 2:WPR180306-001 1X55DF, 3:LCCRD 1X5DF, 4:LCCRD 1X5DF<br><b>1805477212</b>   |  |  |   |   |  |                   |                                  |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. |  |  |   |   |  |                   |                                  |
| Generator's/Officer's Printed/Typed Name<br><b>CLIFF BRICE</b>  |  | Signature<br><i>[Signature]</i>  |   | Month Day Year<br><b>10 31 18</b>             |  |                   |                                  |
| INTL  | 16. International Shipments<br><input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. |  | Port of entry/exit:<br>Date leaving U.S.: |   |  |                   |                                  |
|   | Transporter signature (for exports only):  |  |   |   |  |                   |                                  |
| TRANSPORTER   | 17. Transporter Acknowledgment of Receipt of Materials   |  |   |   |  |                   |                                  |
|   | Transporter 1 Printed/Typed Name<br><b>Kim E Witzki</b>  |  | Signature<br><i>[Signature]</i>           |   | Month Day Year<br><b>10 31 18</b>                            |                   |                                  |
| DESIGNATED FACILITY   | Transporter 2 Printed/Typed Name   |  | Signature                                 |   | Month Day Year   |                   |                                  |
|   | 18. Discrepancy  |  |   |   |  |                   |                                  |
| 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection   |  |  |   |   |  |                   |                                  |
| Manifest Reference Number:  |  |  |   |   |  |                   |                                  |
| 18b. Alternate Facility (or Generator) U.S. EPA ID Number   |  |  |   |   |  |                   |                                  |
| Facility's Phone:   |  |  |   |   |  |                   |                                  |
| 18c. Signature of Alternate Facility (or Generator) Month Day Year  |  |  |   |   |  |                   |                                  |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)   |  |  |   |   |  |                   |                                  |
| 1. <b>H040</b> 2. <b>H040</b> 3. <b>H040</b> 4. <b>H040</b>   |  |  |   |   |  |                   |                                  |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a  |  |  |   |   |  |                   |                                  |
| Printed/Typed Name<br><b>Jessica Gibson</b>   |  | Signature<br><i>[Signature]</i>  |   | Month Day Year<br><b>11 01 18</b>             |  |                   |                                  |

| UNIFORM HAZARDOUS WASTE MANIFEST<br>(Continuation Sheet)  |  | 21. Generator ID Number | 22. Page | 23. Manifest Tracking Number |                   |                 |      |      |
|---|--|-------------------------|----------|------------------------------|-------------------|-----------------|------|------|
|   |  | CO821320725             | 2 of 6   | 040823766JJK                 |                   |                 |      |      |
| 24. Generator's Name<br>PUEBLO CHEMICAL DEPOT   |  |                         |          |                              |                   |                 |      |      |
| 25. Transporter _____ Company Name  |  |                         |          | U.S. EPA ID Number           |                   |                 |      |      |
| 26. Transporter _____ Company Name  |  |                         |          | U.S. EPA ID Number           |                   |                 |      |      |
| 27a.<br>HM  | 27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))  | 28. Containers          |          | 29. Total Quantity           | 30. Unit Wt./Vol. | 31. Waste Codes |      |      |
|   |  | No.                     | Type     |                              |                   |                 |      |      |
| 5<br>X  | RQ, UN1993, WASTE FLAMMABLE LIQUIDS, N.O.S. (TOLUENE, XYLENE), 3, III, (RQ D001), 128  | 1                       | DF       | 254                          | P                 | U002            | D018 | D001 |
|   |  |                         |          |                              |                   | U151            | U220 | U239 |
| 6<br>X  | RQ, UN1992, WASTE FLAMMABLE LIQUIDS, TOXIC, N.O.S. (XYLENE, 1-BUTANOL), 3 (6.1), II, (RQ D001), 131  | 2                       | DF       | 360                          | P                 | D001            | D018 | D005 |
|   |  |                         |          |                              |                   | U239            | D035 | U159 |
| 7<br>X  | UN1263, WASTE PAINT RELATED MATERIAL, 3, III, 128  | 1                       | DM       | 97                           | P                 | D005            | D018 | D035 |
|   |  |                         |          |                              |                   | D001            | U031 | U159 |
| 8<br>X  | UN3082, WASTE ENVIRONMENTALLY HAZARDOUS SUBSTANCE, LIQUID, N.O.S. (SILVER CHLORIDE, POTASSIUM CHLORIDE), 9, III, 171   | 1                       | DF       | 15                           | P                 | D011            |      |      |
| 9<br>X  | UN3082, WASTE ENVIRONMENTALLY HAZARDOUS SUBSTANCE, LIQUID, N.O.S. (HEXYLENE GLYCOL), 9, III, 171   | 1                       | DF       | 64                           | P                 | U239            |      |      |
| 10<br>X   | UN3082, WASTE ENVIRONMENTALLY HAZARDOUS SUBSTANCE, LIQUID, N.O.S. (METHANOL), 9, III, 171  | 1                       | DF       | 18                           | P                 | U154            |      |      |
| 11<br>X   | UN3077, WASTE ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S. (METHYL ETHYL KETONE, CHLOROBENZENE), 9, III, 171   | 2                       | DF       | 76                           | P                 | D021            | D035 | U037 |
|   |  |                         |          |                              |                   | U159            |      |      |
| 12<br>X   | UN3077, WASTE ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S. (METHYL ETHYL KETONE, BARIUM SULFATE), 9, III, 171  | 1                       | DF       | 136                          | P                 | D001            | D005 | D018 |
|   |  |                         |          |                              |                   | D035            | U159 | U239 |
| 13<br>X   | UN2014, WASTE HYDROGEN PEROXIDE, AQUEOUS SOLUTIONS WITH NOT LESS THAN 20 PERCENT BUT NOT MORE THAN 40 PERCENT HYDROGEN PEROXIDE (STABILIZED AS NECESSARY), 5.1, (8), II, 140 | 3                       | DF       | 588                          | P                 | D011            | D001 | D002 |
|   |  |                         |          |                              |                   |                 |      |      |
| 32. Special Handling Instructions and Additional Information<br>5:LCCRD 1X55DF, 6:LCCRD 2X55DF, 7:LCCRD 1X30DF, 8:LCCRC 1X5DF, 9:LCCRC 1X55DF, 10:LCCRC 1X5DF, 11:LCCRC 1X55DF 1X5DF 12:LCCRD 1X55DF, 13:LCCRO 3X55DF |  |                         |          |                              |                   |                 |      |      |
| 33. Transporter Acknowledgment of Receipt of Materials<br>Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____   |  |                         |          |                              |                   |                 |      |      |
| 34. Transporter Acknowledgment of Receipt of Materials<br>Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____   |  |                         |          |                              |                   |                 |      |      |
| 35. Discrepancy _____   |  |                         |          |                              |                   |                 |      |      |
| 36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)<br>5. H040 16. H040 17. H040 18. H040 19. H040<br>10. H040 11. H040 12. H040 13. H141 |  |                         |          |                              |                   |                 |      |      |

|  |   |   |    |                    |  |                    |                              |
|--|---|---|----|--------------------|--|--------------------|------------------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b><br>(Continuation Sheet)  |   | 21. Generator ID Number<br>CO8213820725 |    | 22. Page<br>3 of 6 | 23. Manifest Tracking Number<br>010923765JJK |                    |                              |
| 24. Generator's Name<br>PUEBLO CHEMICAL DEPOT  |   |   |    |                    |  |                    |                              |
| 25. Transporter _____ Company Name   |   |   |    |                    |  | U.S. EPA ID Number |                              |
| 26. Transporter _____ Company Name   |   |   |    |                    |  | U.S. EPA ID Number |                              |
| 27a. HM  | 27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))                           | 28. Containers<br>No. Type              |    | 29. Total Quantity | 30. Unit<br>Wt./Vol.                         | 31. Waste Codes    |                              |
| 14<br>X  | UN3077, WASTE ENVIRONMENTALLY HAZARDOUS SUBSTANCES, SOLID, N.O.S. (METHANOL, 1,2,4-TRIMETHYLBENZENE), 9, III, 171                         | 1                                       | DF | 18                 | P  | D007<br>U154       | D018<br>U223<br>U055<br>U239 |
| 15<br>X  | UN2929, WASTE TOXIC LIQUIDS, FLAMMABLE, ORGANIC, N.O.S. (DICHLOROMETHANE, METHANOL), 6.1, (3), II, 131                                    | 1                                       | DF | 4                  | P  | D001<br>P082       | U012<br>D038<br>U073<br>U154 |
| 16<br>X  | UN3082, WASTE ENVIRONMENTALLY HAZARDOUS SUBSTANCES, LIQUID, N.O.S. (TERTAMETHYL THIURAM DISULFIDE, ETHYLENE OXIDE), 9, III, 171           | 2                                       | DF | 321                | P  | U115               | U122<br>U244                 |
| 17<br>X  | UN3082, WASTE ENVIRONMENTALLY HAZARDOUS SUBSTANCE, LIQUID, N.O.S., (SILVER), 9, III, 171  | 1                                       | DF | 8                  | P  | D011               |                              |
| 18<br>X  | UN3077, WASTE ENVIRONMENTALLY HAZARDOUS SUBSTANCES, SOLID, N.O.S. (1,2,4-TRIMETHYLBENZENE, XYLENE), 9, III, 171                           | 1                                       | DF | 205                | P  | D007<br>U223       | D018<br>U239<br>U055         |
| 19<br>X  | UN3077, WASTE ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S. (ETHYLBENZENE, XYLENE), 9, III, 171                                      | 1                                       | DF | 52                 | P  | D018               |                              |
| 20<br>X  | RQ, UN2922, WASTE CORROSIVE LIQUID, TOXIC, N.O.S. (POLY(OXYPROPYLENE)DIAMINE, DIETHYLMETHYLBENZENEDIAMINE), 8, (6.1), III, (RQ 0002), 154 | 1                                       | DF | 164                | P  | D002               |                              |
| 21<br>X  | UN1133, WASTE ADHESIVES, CONTAINING A FLAMMABLE LIQUID, 3, II, 128  | 2                                       | DF | 312                | P  | U002<br>U220       | D001<br>U056                 |
| 22<br>X  | UN1263, WASTE PAINT RELATED MATERIAL, 3, III, 128   | 1                                       | DF | 6                  | P  | D018<br>U239       | D001<br>U161                 |
| 32. Special Handling Instructions and Additional Information.<br>14:LCCRC 1X5DF, 15:1X5DF, 16:LCCRC 1X55DF, 17:LCCRC 1X5DF, 18:LCCRC 1X55DF, 19:LCCRC 1X55DF, 20:LCCRC 1X55DF, 21:LCCRD 1X5DF 1X55DF, 22:LCCRD 1X2.5DF |   |   |    |                    |  |                    |                              |
| 33. Transporter Acknowledgment of Receipt of Materials<br>Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____  |   |   |    |                    |  |                    |                              |
| 34. Transporter Acknowledgment of Receipt of Materials<br>Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____  |   |   |    |                    |  |                    |                              |
| 35. Discrepancy<br>Add profile, LCCRC for line 15 and profile R015.000 per per diff price. 1611-6-18   |   |   |    |                    |  |                    |                              |
| 36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)<br>14.H040 15.H040 16.H040 17.H040 18.H040<br>19.H040 20.H040 21.H040 22.H040          |   |   |    |                    |  |                    |                              |



|  |   |   |    |                       |  |                        |  |
|--|---|---|----|-----------------------|--|------------------------|--|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b><br>(Continuation Sheet)  |   | 21. Generator ID Number<br>C08213820725 |    | 22. Page<br>4 of 6    | 23. Manifest Tracking Number<br>010823766JJK |                        |  |
| 24. Generator's Name<br>PUEBLO CHEMICAL DEFOT  |   |   |    |                       |  |                        |  |
| 25. Transporter _____ Company Name   |   |   |    |                       | U.S. EPA ID Number                           |                        |  |
| 26. Transporter _____ Company Name   |   |   |    |                       | U.S. EPA ID Number                           |                        |  |
| 27a.<br>HM   | 27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))                 | 28. Containers<br>No. Type              |    | 29. Total<br>Quantity | 30. Unit<br>WL/Vol.                          | 31. Waste Codes        |  |
| 23<br>X  | RQ, UN1992, WASTE FLAMMABLE LIQUIDS, TOXIC, N.O.S. (TOLUENE, XYLENE), 3, (6.1), II, (RQ D001), 131                              | 1                                       | DF | 147                   | P  | D001 U002 U220<br>U239 |  |
| 24<br>X  | UN3088, WASTE OXIDIZING LIQUID, CORROSIVE, N.O.S. (POTASSIUM PERSULFATE SOLUTION), 5.1, (8), II, 140                            | 1                                       | DF | 18                    | P  | D011 D001 D002         |  |
| 25<br>X  | UN1993, WASTE FLAMMABLE LIQUIDS, N.O.S. (METHANOL), 3, II, 128, EX2008120022 (SECOND REVISION)                                  | 1                                       | DF | 6                     | P  | P081 U154 D001         |  |
| 26<br>X  | UN3082, WASTE ENVIRONMENTALLY HAZARDOUS SUBSTANCES, LIQUID, N.O.S. (TERTAMETHYL THIURAM DISULFIDE, ETHYLENE OXIDE), 9, III, 171 | 1                                       | DF | 115                   | P  | U115 U122 U244         |  |
| 27<br>X  | UN3264, WASTE CORROSIVE LIQUID, ACIDIC, INORGANIC, N.O.S. (HYDROCHLORIC ACID SOLUTION, MERCURY), 8, II, 154                     | 1                                       | DF | 5                     | P  | D009 D002              |  |
| 28<br>X  | UN2811, WASTE TOXIC SOLIDS, ORGANIC, N.O.S. (VINYL CHLORIDE, SPENT CARBON), 6.1, III, 154                                       | 2                                       | DF | 154                   | P  | D043 K903              |  |
| 29<br>X  | UN2031, WASTE NITRIC ACID OTHER THAN RED FUMING, WITH NOT MORE THAN 20 PERCENT NITRIC ACID SOLUTION, 8, II, 157                 | 1                                       | DF | 12                    | P  | D002                   |  |
| 30<br>X  | UN1824, WASTE SODIUM HYDROXIDE SOLUTION, 8, II, 154   | 2                                       | DF | 24                    | P  | D002                   |  |
| 31<br>X  | UN1805, WASTE PHOSPHORIC ACID SOLUTION, 8, III, 154   | 1                                       | DF | 13                    | P  | D002                   |  |
| 32<br>X  | UN3077, WASTE ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S. (MERCURY CHLORIDE), 9, III, 171                                | 1                                       | DF | 6                     | P  | D009                   |  |
| 32. Special Handling Instructions and Additional Information<br>23:LCCRD 1X5DF, 24:LCCRO 1X5DF, 25:LCCRD 1X4GF, 26:LCCRC 1X55DF, 27:LCHG4 1X2.5DF, 28:WPR180505-001 2X55DF, 29:LCCRA 1X5DF, 30:LCCRB 2X5DF, 31:LCCRA 1X5DF, 32:LCHG4 1X5DF |   |   |    |                       |  |                        |  |
| 33. Transporter Acknowledgment of Receipt of Materials<br>Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____  |   |   |    |                       |  |                        |  |
| 34. Transporter Acknowledgment of Receipt of Materials<br>Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____  |   |   |    |                       |  |                        |  |
| 35. Discrepancy _____  |   |   |    |                       |  |                        |  |
| 36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)<br>23. H040 24. H141 25. H040 26. H040 27. H141<br>28. H040 29. H040 30. H040 31. H040 32. H141            |   |   |    |                       |  |                        |  |

| UNIFORM HAZARDOUS WASTE MANIFEST<br>(Continuation Sheet)   |   | 21. Generator ID Number  | 22. Page      | 23. Manifest Tracking Number |                   |                 |  |
|--|---|--------------------------|---------------|------------------------------|-------------------|-----------------|--|
| 24. Generator's Name<br><b>PUEBLO CHEMICAL DEPOT</b>   |   | <b>CO6213820725</b>      | <b>5 of 6</b> | <b>040823796JJK</b>          |                   |                 |  |
| 25. Transporter _____ Company Name   |   | U.S. EPA ID Number _____ |               |                              |                   |                 |  |
| 26. Transporter _____ Company Name   |   | U.S. EPA ID Number _____ |               |                              |                   |                 |  |
| 27a. HM  | 27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))             | 28. Containers           |               | 29. Total Quantity           | 30. Unit Wt./Vol. | 31. Waste Codes |  |
|  |   | No.                      | Type          |                              |                   |                 |  |
| 33 X   | UN1983, WASTE FLAMMABLE LIQUIDS, N.O.S. (2,2,4-TRIMETHYLPENTANE) 3, II, 128   | 1                        | DF            | 6                            | P                 | D001            |  |
| 34 X   | UN1219, WASTE ISOPROPYL ALCOHOL, 3, II, 129   | 3                        | DF            | 37                           | P                 | D001            |  |
| 35 X   | UN2822, WASTE CORROSIVE LIQUIDS, TOXIC, N.O.S. (POLY(OXYPROPYLENE)DIAMINE, DIETHYLMETHYLBENZENEDIAMINE), 8, (0-1), III, 154 | 1                        | DF            | 87                           | P                 | D002            |  |
| 36 X   | UN3077, WASTE ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S. (BENZENE), 9, III, 171                                     | 1                        | DM            | 102                          | P                 | D018            |  |
| 37 X   | UN3077, WASTE ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S. (BENZENE), 9, III, 171                                     | 4                        | DF            | 121                          | P                 | D018            |  |
| 38 X   | UN1760, WASTE CORROSIVE LIQUIDS, N.O.S. (TETRABUTYLAMMONIUM HYDROXIDE, BENZYLAMINE), 8, II, 154                             | 3                        | DF            | 312                          | P                 | D002            |  |
| 39 X   | UN2796, WASTE SULFURIC ACID, 8, II, 157   | 2                        | DF            | 194                          | P                 | D002            |  |
| 40 X   | UN3260, CORROSIVE SOLID, ACIDIC, INORGANIC, N.O.S. (ORTHOPHOSPHORIC ACID), 8, II, 154                                       | 1                        | DF            | 256                          | P                 |                 |  |
| 41 X   | UN3261, CORROSIVE SOLIDS, ACIDIC, ORGANIC, N.O.S. (ACETIC ACID, 1,2-DIAMINOETHANE), 8, III, 154                             | 1                        | DF            | 7                            | P                 |                 |  |
| 42 X   | UN3287, TOXIC LIQUIDS, INORGANIC, N.O.S. (TRISODIUM PHOSPHATE), 6.1, III, 151   | 1                        | DF            | 115                          | P                 |                 |  |
| 32. Special Handling Instructions and Additional Information<br>33: LCCRD 1X5DF, 34: LCCRD 2X5DF 1X12.2DF, 35: LCCRB 1X55DF, 36: R015_000 1X55DM, 37: 2X55DF 2X5DF, 38: LCCRB 3X 55DF, 39: LCCRA 2X55DF, 40: LCCRA 1X55DF, 41: LCCRC 1X5DF, 42: LCCRC 1X55DF |   |                          |               |                              |                   |                 |  |
| 33. Transporter Acknowledgment of Receipt of Materials<br>Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____  |   |                          |               |                              |                   |                 |  |
| 34. Transporter Acknowledgment of Receipt of Materials<br>Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____  |   |                          |               |                              |                   |                 |  |
| 35. Discrepancy<br>Add profile R015_000 for line 37 per Cliff Brice.<br>J611-16-18   |   |                          |               |                              |                   |                 |  |
| 36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)<br>33. H040 34. H040 35. H040 36. H040 37. H040<br>38. H040 39. H040 40. H040 41. H040 42. H040                              |   |                          |               |                              |                   |                 |  |

| UNIFORM HAZARDOUS WASTE MANIFEST<br>(Continuation Sheet)  |   | 21. Generator ID Number<br>C08243820725 | 22. Page<br>6 of 6 | 23. Manifest Tracking Number<br>010023766JJK |                      |                    |  |
|---|---|---|--------------------|--|----------------------|--------------------|--|
| 24. Generator's Name<br>PUEBLO CHEMICAL DEPOT   |   |   |                    |  |                      |                    |  |
| 25. Transporter _____ Company Name  |   |   |                    |  |                      | U.S. EPA ID Number |  |
| 26. Transporter _____ Company Name  |   |   |                    |  |                      | U.S. EPA ID Number |  |
| 27a.<br>HM  | 27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 28. Containers<br>No. Type              |                    | 29. Total<br>Quantity                        | 30. Unit<br>Wt./Vol. | 31. Waste Codes    |  |
| 43<br>X   | UN3260, CORROSIVE SOLID, ACIDIC, INORGANIC, N.O.S.<br>(STANNOUS CHLORIDE), 8, III, 154                          | 1                                       | DF                 | 8  | P                    |                    |  |
| 44<br>X   | NA1993, COMBUSTIBLE LIQUID, N.O.S. (DIACETONE<br>ALCOHOL), III, 128   | 1                                       | DF                 | 22   | P                    |                    |  |
| 45  | NON DOT REGULATED   | 5                                       | DF                 | 56   | P                    |                    |  |
| 46  | NON-DOT REGULATED   | 1                                       | DF                 | 7  | P                    |                    |  |
| 47  | NON DOT REGULATED   | 2                                       | DF                 | 342  | P                    |                    |  |
| 48  | NON DOT REGULATED   | 11                                      | DF                 | 110  | P                    |                    |  |
| 49  | NON DOT REGULATED   | 1                                       | DF                 | 7  | P                    |                    |  |
|   |   |   |                    |  |                      |                    |  |
|   |   |   |                    |  |                      |                    |  |
|   |   |   |                    |  |                      |                    |  |
|   |   |   |                    |  |                      |                    |  |
| 32. Special Handling Instructions and Additional Information<br>43:LCCRA 1X5DF, 44:LCCRD 1X5DF, 45:LCCRC 3X5DF 1X12DF 1X2.5DF, 46:LCCRC 1X5DF, 47:LCCRC 2X55DF, 48:LCCRC: 8X<br>5DF 3X2.5DF, 49:LCCRC 1X5DF |   |   |                    |  |                      |                    |  |
| 33. Transporter Acknowledgment of Receipt of Materials<br>Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____   |   |   |                    |  |                      |                    |  |
| 34. Transporter Acknowledgment of Receipt of Materials<br>Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____   |   |   |                    |  |                      |                    |  |
| 35. Discrepancy   |   |   |                    |  |                      |                    |  |
| 36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)<br>43. H040 44. H040 45. H040 46. H040 47. H040<br>48. H040 49. H040        |   |   |                    |  |                      |                    |  |

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

Profile Number: WPR131230\_001

**Waste Codes**

|                               |                               |  |                               |                               |                               |                               |  |
|-------------------------------|-------------------------------|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|--|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032            | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205 | <input type="checkbox"/> P001            |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033            | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108 | <input type="checkbox"/> U206 | <input type="checkbox"/> P012            |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034            | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U117 | <input type="checkbox"/> U213 | <input type="checkbox"/> P030            |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035            | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U112 | <input type="checkbox"/> U218 | <input type="checkbox"/> P051            |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036            | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075            |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037            | <input type="checkbox"/> F006 | <input type="checkbox"/> U019 | <input type="checkbox"/> U123 | <input type="checkbox"/> U226 | <input type="checkbox"/> P088            |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038            | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U129 | <input type="checkbox"/> U228 | <input type="checkbox"/> P098            |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039            | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136 | <input type="checkbox"/> U236 | <input type="checkbox"/> P105            |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040            | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205            |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041            | <input type="checkbox"/> F010 | <input type="checkbox"/> U056 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246 | <input type="checkbox"/> K901            |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042            | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150 | <input type="checkbox"/> U279 | <input type="checkbox"/> K902            |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input checked="" type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U154 | <input type="checkbox"/> U404 | <input checked="" type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |  | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U165 |                               |  |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |  | <input type="checkbox"/> F039 | <input type="checkbox"/> U076 | <input type="checkbox"/> U196 |                               |  |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |  |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202 |                               |  |
| <input type="checkbox"/> D016 |                               |  |                               |                               |                               |                               |  |

**Underlying Hazardous Constituents**

☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.

☐ No UHCs are present upon generation.

☒ Disposal facility will check for all UHCs (no UHC form required).

**NOTIFICATION / CERTIFICATION STATEMENTS** (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

|               |   |
|---------------|---|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>    | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(III)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>    | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| <b>C.</b>     | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D.</b>     | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E.</b>     | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

2

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

Profile Number: WPR180306-001

**Waste Codes**

|  |                               |  |                               |                               |                               |                               |  |
|--|-------------------------------|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|--|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032            | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205 | <input type="checkbox"/> P001            |
| <input type="checkbox"/> D002            | <input type="checkbox"/> D018 | <input type="checkbox"/> D033            | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108 | <input type="checkbox"/> U206 | <input type="checkbox"/> P012            |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034            | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U117 | <input type="checkbox"/> U213 | <input type="checkbox"/> P030            |
| <input checked="" type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035            | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U112 | <input type="checkbox"/> U218 | <input type="checkbox"/> P051            |
| <input checked="" type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036            | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075            |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037            | <input type="checkbox"/> F006 | <input type="checkbox"/> U011 | <input type="checkbox"/> U123 | <input type="checkbox"/> U226 | <input type="checkbox"/> P088            |
| <input checked="" type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038            | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U129 | <input type="checkbox"/> U228 | <input type="checkbox"/> P098            |
| <input checked="" type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039            | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136 | <input type="checkbox"/> U236 | <input type="checkbox"/> P105            |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040            | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205            |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041            | <input type="checkbox"/> F010 | <input type="checkbox"/> U061 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246 | <input type="checkbox"/> K901            |
| <input checked="" type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042            | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150 | <input type="checkbox"/> U279 | <input type="checkbox"/> K902            |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input checked="" type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U154 | <input type="checkbox"/> U404 | <input checked="" type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |  | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |  |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |  | <input type="checkbox"/> F039 | <input type="checkbox"/> U076 | <input type="checkbox"/> U196 |                               |  |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |  |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202 |                               |  |
| <input type="checkbox"/> D016            |                               |  |                               |                               |                               |                               |  |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
- ☐ No UHCs are present upon generation.
- ☒ Disposal facility will check for all UHCs (no UHC form required).

**NOTIFICATION / CERTIFICATION STATEMENTS** (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

|               |   |
|---------------|---|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>    | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>    | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| <b>C.</b>     | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D.</b>     | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E.</b>     | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

**3**

**Generator Name:** Pueblo Chemical Depot (PCAPP)

**Manifest Number:** 010923766/JK

**EPA ID Number:** CO8213820725

**Profile Number:** 041218-PTP-001

| Waste Codes                              |                               |  |                               |  |  |  |                               |
|--|-------------------------------|--|-------------------------------|--|--|--|-------------------------------|
| <input checked="" type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032            | <input type="checkbox"/> F001 | <input checked="" type="checkbox"/> U002 | <input type="checkbox"/> U080            | <input type="checkbox"/> U205            | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002            | <input type="checkbox"/> D018 | <input type="checkbox"/> D033            | <input type="checkbox"/> F002 | <input type="checkbox"/> U003            | <input type="checkbox"/> U108            | <input type="checkbox"/> U206            | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034            | <input type="checkbox"/> F003 | <input type="checkbox"/> U006            | <input type="checkbox"/> U117            | <input checked="" type="checkbox"/> U213 | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input checked="" type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007            | <input type="checkbox"/> U112            | <input type="checkbox"/> U218            | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036            | <input type="checkbox"/> F005 | <input type="checkbox"/> U010            | <input type="checkbox"/> U122            | <input type="checkbox"/> U220            | <input type="checkbox"/> P081 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037            | <input type="checkbox"/> F006 | <input type="checkbox"/> U011            | <input type="checkbox"/> U123            | <input type="checkbox"/> U226            | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038            | <input type="checkbox"/> F007 | <input type="checkbox"/> U044            | <input type="checkbox"/> U129            | <input type="checkbox"/> U228            | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039            | <input type="checkbox"/> F008 | <input type="checkbox"/> U048            | <input type="checkbox"/> U136            | <input type="checkbox"/> U236            | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040            | <input type="checkbox"/> F009 | <input type="checkbox"/> U052            | <input type="checkbox"/> U144            | <input type="checkbox"/> U239            | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041            | <input type="checkbox"/> F010 | <input type="checkbox"/> U056            | <input type="checkbox"/> U147            | <input type="checkbox"/> U246            | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042            | <input type="checkbox"/> F011 | <input checked="" type="checkbox"/> U057 | <input type="checkbox"/> U150            | <input type="checkbox"/> U279            | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043            | <input type="checkbox"/> F012 | <input type="checkbox"/> U070            | <input checked="" type="checkbox"/> U159 | <input type="checkbox"/> U404            | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |  | <input type="checkbox"/> F019 | <input type="checkbox"/> U072            | <input type="checkbox"/> U188            |  |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |  | <input type="checkbox"/> F039 | <input type="checkbox"/> U076            | <input type="checkbox"/> U196            |  |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |  |                               | <input type="checkbox"/> U077            | <input type="checkbox"/> U202            |  |                               |
| <input type="checkbox"/> D016            |                               |  |                               |  |  |  |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |  |
|--|--|
| <b>A or X</b>  | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| <b>B.1</b>   | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>B.2</b>   | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| <b>B.3</b>   | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(III)]</b><br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>   | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| <b>C.</b>  | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| <b>D.</b>  | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(I)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>E.</b>  | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

4

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

LCCRD=  
Profile Number: 042118-MR-001

| Waste Codes                              |  |                               |                               |  |  |  |                               |
|--|--|-------------------------------|-------------------------------|--|--|--|-------------------------------|
| <input checked="" type="checkbox"/> D001 | <input type="checkbox"/> D017            | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input checked="" type="checkbox"/> U002 | <input type="checkbox"/> U080            | <input type="checkbox"/> U205            | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input checked="" type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003            | <input type="checkbox"/> U108            | <input type="checkbox"/> U206            | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019            | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006            | <input type="checkbox"/> U117            | <input type="checkbox"/> U213            | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020            | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007            | <input type="checkbox"/> U112            | <input type="checkbox"/> U218            | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021            | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010            | <input type="checkbox"/> U122            | <input type="checkbox"/> U220            | <input type="checkbox"/> P081 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022            | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011            | <input type="checkbox"/> U123            | <input type="checkbox"/> U226            | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023            | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044            | <input type="checkbox"/> U129            | <input type="checkbox"/> U228            | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024            | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048            | <input type="checkbox"/> U136            | <input type="checkbox"/> U236            | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025            | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052            | <input type="checkbox"/> U144            | <input checked="" type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026            | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U056            | <input type="checkbox"/> U147            | <input type="checkbox"/> U246            | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input checked="" type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069            | <input type="checkbox"/> U150            | <input type="checkbox"/> U279            | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028            | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070            | <input checked="" type="checkbox"/> U154 | <input type="checkbox"/> U404            | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029            |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072            | <input type="checkbox"/> U188            |  |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030            |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076            | <input type="checkbox"/> U196            |  |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031            |                               |                               | <input type="checkbox"/> U077            | <input type="checkbox"/> U202            |  |                               |
| <input type="checkbox"/> D016            |  |                               |                               |  |  |  |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |  |
|--|--|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(III)]</b><br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

5

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: CO8213820725

LCCRD=  
Profile Number: 032218-BSS-005

**Waste Codes**

|  |  |                               |                               |  |  |  |                               |
|--|--|-------------------------------|-------------------------------|--|--|--|-------------------------------|
| <input checked="" type="checkbox"/> D001 | <input type="checkbox"/> D017            | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input checked="" type="checkbox"/> U002 | <input type="checkbox"/> U080            | <input type="checkbox"/> U205            | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002            | <input checked="" type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003            | <input type="checkbox"/> U108            | <input type="checkbox"/> U206            | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019            | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006            | <input type="checkbox"/> U115            | <input type="checkbox"/> U213            | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020            | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007            | <input type="checkbox"/> U112            | <input type="checkbox"/> U218            | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021            | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010            | <input type="checkbox"/> U122            | <input checked="" type="checkbox"/> U220 | <input type="checkbox"/> P081 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022            | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011            | <input type="checkbox"/> U123            | <input type="checkbox"/> U226            | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023            | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044            | <input type="checkbox"/> U129            | <input type="checkbox"/> U228            | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024            | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048            | <input type="checkbox"/> U136            | <input type="checkbox"/> U236            | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025            | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052            | <input type="checkbox"/> U144            | <input checked="" type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026            | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U056            | <input type="checkbox"/> U147            | <input type="checkbox"/> U246            | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027            | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069            | <input type="checkbox"/> U150            | <input type="checkbox"/> U279            | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028            | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070            | <input type="checkbox"/> U154            | <input type="checkbox"/> U404            | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029            |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072            | <input checked="" type="checkbox"/> U161 |  |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030            |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076            | <input type="checkbox"/> U196            |  |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031            |                               |                               | <input type="checkbox"/> U077            | <input type="checkbox"/> U202            |  |                               |
| <input type="checkbox"/> D016            |  |                               |                               |  |  |  |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

**NOTIFICATION / CERTIFICATION STATEMENTS** (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

|               |  |
|---------------|--|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>B.2</b>    | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| <b>B.3</b>    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>    | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| <b>C.</b>     | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| <b>D.</b>     | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>E.</b>     | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

**Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018



**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

6

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

LCCRD=  
Profile Number: 032118-MP-007

**Waste Codes**

|  |  |  |                               |  |  |  |                               |
|--|--|--|-------------------------------|--|--|--|-------------------------------|
| <input checked="" type="checkbox"/> D001 | <input type="checkbox"/> D017            | <input type="checkbox"/> D032            | <input type="checkbox"/> F001 | <input type="checkbox"/> U002            | <input type="checkbox"/> U080            | <input type="checkbox"/> U205            | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002            | <input checked="" type="checkbox"/> D018 | <input type="checkbox"/> D033            | <input type="checkbox"/> F002 | <input type="checkbox"/> U003            | <input type="checkbox"/> U108            | <input type="checkbox"/> U206            | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019            | <input type="checkbox"/> D034            | <input type="checkbox"/> F003 | <input type="checkbox"/> U006            | <input type="checkbox"/> U115            | <input type="checkbox"/> U213            | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020            | <input checked="" type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007            | <input type="checkbox"/> U112            | <input type="checkbox"/> U218            | <input type="checkbox"/> P051 |
| <input checked="" type="checkbox"/> D005 | <input type="checkbox"/> D021            | <input type="checkbox"/> D036            | <input type="checkbox"/> F005 | <input type="checkbox"/> U010            | <input type="checkbox"/> U122            | <input type="checkbox"/> U220            | <input type="checkbox"/> P081 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022            | <input type="checkbox"/> D037            | <input type="checkbox"/> F006 | <input type="checkbox"/> U011            | <input type="checkbox"/> U123            | <input type="checkbox"/> U226            | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023            | <input type="checkbox"/> D038            | <input type="checkbox"/> F007 | <input checked="" type="checkbox"/> U031 | <input type="checkbox"/> U129            | <input type="checkbox"/> U228            | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024            | <input type="checkbox"/> D039            | <input type="checkbox"/> F008 | <input type="checkbox"/> U048            | <input type="checkbox"/> U136            | <input type="checkbox"/> U236            | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025            | <input type="checkbox"/> D040            | <input type="checkbox"/> F009 | <input type="checkbox"/> U052            | <input type="checkbox"/> U144            | <input checked="" type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026            | <input type="checkbox"/> D041            | <input type="checkbox"/> F010 | <input type="checkbox"/> U056            | <input type="checkbox"/> U147            | <input type="checkbox"/> U246            | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027            | <input type="checkbox"/> D042            | <input type="checkbox"/> F011 | <input type="checkbox"/> U069            | <input type="checkbox"/> U150            | <input type="checkbox"/> U279            | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028            | <input type="checkbox"/> D043            | <input type="checkbox"/> F012 | <input type="checkbox"/> U070            | <input checked="" type="checkbox"/> U159 | <input type="checkbox"/> U404            | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029            |  | <input type="checkbox"/> F019 | <input type="checkbox"/> U072            | <input type="checkbox"/> U161            |  |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030            |  | <input type="checkbox"/> F039 | <input type="checkbox"/> U076            | <input type="checkbox"/> U196            |  |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031            |  |                               | <input type="checkbox"/> U077            | <input type="checkbox"/> U202            |  |                               |
| <input type="checkbox"/> D016            |  |  |                               |  |  |  |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |  |
|--|--|
| <b>A or X</b>  | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| <b>B.1</b>   | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>B.2</b>   | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| <b>B.3</b>   | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>   | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| <b>C</b>   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| <b>D</b>   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>E</b>   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromono fluoromethane            |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

7

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

LCCRD=

Profile Number: 032118-MP-002

**Waste Codes**

|  |  |  |                               |  |  |  |                               |
|--|--|--|-------------------------------|--|--|--|-------------------------------|
| <input checked="" type="checkbox"/> D001 | <input type="checkbox"/> D017            | <input type="checkbox"/> D032            | <input type="checkbox"/> F001 | <input type="checkbox"/> U002            | <input type="checkbox"/> U080            | <input type="checkbox"/> U205            | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002            | <input checked="" type="checkbox"/> D018 | <input type="checkbox"/> D033            | <input type="checkbox"/> F002 | <input type="checkbox"/> U003            | <input type="checkbox"/> U108            | <input type="checkbox"/> U206            | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019            | <input type="checkbox"/> D034            | <input type="checkbox"/> F003 | <input type="checkbox"/> U006            | <input type="checkbox"/> U115            | <input type="checkbox"/> U213            | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020            | <input checked="" type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007            | <input type="checkbox"/> U112            | <input type="checkbox"/> U218            | <input type="checkbox"/> P051 |
| <input checked="" type="checkbox"/> D005 | <input type="checkbox"/> D021            | <input type="checkbox"/> D036            | <input type="checkbox"/> F005 | <input type="checkbox"/> U010            | <input type="checkbox"/> U122            | <input type="checkbox"/> U220            | <input type="checkbox"/> P081 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022            | <input type="checkbox"/> D037            | <input type="checkbox"/> F006 | <input type="checkbox"/> U011            | <input type="checkbox"/> U123            | <input type="checkbox"/> U226            | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023            | <input type="checkbox"/> D038            | <input type="checkbox"/> F007 | <input checked="" type="checkbox"/> U031 | <input type="checkbox"/> U129            | <input type="checkbox"/> U228            | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024            | <input type="checkbox"/> D039            | <input type="checkbox"/> F008 | <input type="checkbox"/> U048            | <input type="checkbox"/> U136            | <input type="checkbox"/> U236            | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025            | <input type="checkbox"/> D040            | <input type="checkbox"/> F009 | <input type="checkbox"/> U052            | <input type="checkbox"/> U144            | <input checked="" type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026            | <input type="checkbox"/> D041            | <input type="checkbox"/> F010 | <input type="checkbox"/> U056            | <input type="checkbox"/> U147            | <input type="checkbox"/> U246            | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027            | <input type="checkbox"/> D042            | <input type="checkbox"/> F011 | <input type="checkbox"/> U069            | <input type="checkbox"/> U150            | <input type="checkbox"/> U279            | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028            | <input type="checkbox"/> D043            | <input type="checkbox"/> F012 | <input type="checkbox"/> U070            | <input checked="" type="checkbox"/> U159 | <input type="checkbox"/> U404            | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029            |  | <input type="checkbox"/> F019 | <input type="checkbox"/> U072            | <input type="checkbox"/> U161            |  |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030            |  | <input type="checkbox"/> F039 | <input type="checkbox"/> U076            | <input type="checkbox"/> U196            |  |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031            |  |                               | <input type="checkbox"/> U077            | <input type="checkbox"/> U202            |  |                               |
| <input type="checkbox"/> D016            |  |  |                               |  |  |  |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
- ☐ No UHCs are present upon generation.
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|--|---|
| <b>A or X</b>  | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>B.1</b>   | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>   | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>   | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(III)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>   | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| <b>C</b>   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D</b>   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E</b>   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

8

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766/JK

EPA ID Number: C08213820725

Profile Number: LCCRC-032018-SRC-001

| Waste Codes                              |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002            | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108 | <input type="checkbox"/> U206 | <input type="checkbox"/> P015 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U111 | <input type="checkbox"/> U213 | <input type="checkbox"/> P024 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U112 | <input type="checkbox"/> U218 | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122 | <input type="checkbox"/> U220 | <input type="checkbox"/> P077 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U012 | <input type="checkbox"/> U123 | <input type="checkbox"/> U223 | <input type="checkbox"/> P082 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U021 | <input type="checkbox"/> U129 | <input type="checkbox"/> U228 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136 | <input type="checkbox"/> U236 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U055 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246 | <input type="checkbox"/> K901 |
| <input checked="" type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150 | <input type="checkbox"/> U279 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U154 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U073 | <input type="checkbox"/> U196 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
- ☐ No UHCs are present upon generation.
- ☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| <b>A or X</b>  | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>A</b>   |   |
| <b>B.1</b>   | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>   | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>   | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>   | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| <b>C.</b>  | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D.</b>  | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E.</b>  | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 – F005) if disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

9

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

Profile Number: LCCRC-032018-SRC-003

| Waste Codes                   |                               |                               |                               |                               |                               |  |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|--|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205            | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108 | <input type="checkbox"/> U206            | <input type="checkbox"/> P015 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U111 | <input type="checkbox"/> U213            | <input type="checkbox"/> P024 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U112 | <input type="checkbox"/> U218            | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122 | <input type="checkbox"/> U220            | <input type="checkbox"/> P077 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U012 | <input type="checkbox"/> U123 | <input type="checkbox"/> U223            | <input type="checkbox"/> P082 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U021 | <input type="checkbox"/> U129 | <input type="checkbox"/> U228            | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136 | <input type="checkbox"/> U236            | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144 | <input checked="" type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U055 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246            | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150 | <input type="checkbox"/> U279            | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U154 | <input type="checkbox"/> U404            | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |  |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U073 | <input type="checkbox"/> U196 |  |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202 |  |                               |
| <input type="checkbox"/> D016 |                               |                               |                               |                               |                               |  |                               |

**Underlying Hazardous Constituents**

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- ☐ No UHCs are present upon generation.
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|--|--|
| <b>A or X</b>  | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| <b>B.1</b>   | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>B.2</b>   | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| <b>B.3</b>   | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
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| <b>C.</b>  | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| <b>D.</b>  | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>E.</b>  | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

10

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

Profile Number: LCCRC=040118-CWG-001

**Waste Codes**

|                               |                               |                               |                               |                               |  |                               |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|--|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080            | <input type="checkbox"/> U205 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108            | <input type="checkbox"/> U206 | <input type="checkbox"/> P015 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U117            | <input type="checkbox"/> U213 | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U112            | <input type="checkbox"/> U218 | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122            | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011 | <input type="checkbox"/> U123            | <input type="checkbox"/> U226 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U129            | <input type="checkbox"/> U228 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136            | <input type="checkbox"/> U236 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144            | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U061 | <input type="checkbox"/> U147            | <input type="checkbox"/> U246 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150            | <input type="checkbox"/> U279 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input checked="" type="checkbox"/> U154 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188            |                               |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076 | <input type="checkbox"/> U196            |                               |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202            |                               |                               |
| <input type="checkbox"/> D016 |                               |                               |                               |                               |  |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
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|               |   |
|---------------|---|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>A</b>      |   |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>    | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
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| <b>C.</b>     | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D.</b>     | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E.</b>     | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 - F005) if disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

Profile Number: LCCRC=041618-AMW-003

**Waste Codes**

|                               |  |  |                               |  |  |                               |                               |
|-------------------------------|--|--|-------------------------------|--|--|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017            | <input type="checkbox"/> D032            | <input type="checkbox"/> F001 | <input type="checkbox"/> U002            | <input type="checkbox"/> U080            | <input type="checkbox"/> U205 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018            | <input type="checkbox"/> D033            | <input type="checkbox"/> F002 | <input type="checkbox"/> U003            | <input type="checkbox"/> U108            | <input type="checkbox"/> U206 | <input type="checkbox"/> P015 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019            | <input type="checkbox"/> D034            | <input type="checkbox"/> F003 | <input type="checkbox"/> U006            | <input type="checkbox"/> U111            | <input type="checkbox"/> U213 | <input type="checkbox"/> P024 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020            | <input checked="" type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007            | <input type="checkbox"/> U112            | <input type="checkbox"/> U218 | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005 | <input checked="" type="checkbox"/> D021 | <input type="checkbox"/> D036            | <input type="checkbox"/> F005 | <input type="checkbox"/> U010            | <input type="checkbox"/> U122            | <input type="checkbox"/> U220 | <input type="checkbox"/> P077 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022            | <input type="checkbox"/> D037            | <input type="checkbox"/> F006 | <input type="checkbox"/> U012            | <input type="checkbox"/> U123            | <input type="checkbox"/> U223 | <input type="checkbox"/> P082 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023            | <input type="checkbox"/> D038            | <input type="checkbox"/> F007 | <input type="checkbox"/> U021            | <input type="checkbox"/> U129            | <input type="checkbox"/> U228 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024            | <input type="checkbox"/> D039            | <input type="checkbox"/> F008 | <input checked="" type="checkbox"/> U037 | <input type="checkbox"/> U136            | <input type="checkbox"/> U236 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025            | <input type="checkbox"/> D040            | <input type="checkbox"/> F009 | <input type="checkbox"/> U052            | <input type="checkbox"/> U144            | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026            | <input type="checkbox"/> D041            | <input type="checkbox"/> F010 | <input type="checkbox"/> U055            | <input type="checkbox"/> U147            | <input type="checkbox"/> U246 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027            | <input type="checkbox"/> D042            | <input type="checkbox"/> F011 | <input type="checkbox"/> U069            | <input type="checkbox"/> U150            | <input type="checkbox"/> U279 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028            | <input type="checkbox"/> D043            | <input type="checkbox"/> F012 | <input type="checkbox"/> U070            | <input checked="" type="checkbox"/> U159 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029            |  | <input type="checkbox"/> F019 | <input type="checkbox"/> U072            | <input type="checkbox"/> U188            |                               |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030            |  | <input type="checkbox"/> F039 | <input type="checkbox"/> U073            | <input type="checkbox"/> U196            |                               |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031            |  |                               | <input type="checkbox"/> U077            | <input type="checkbox"/> U202            |                               |                               |
| <input type="checkbox"/> D016 |  |  |                               |  |  |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
- ☐ No UHCs are present upon generation.
- ☒ Disposal facility will check for all UHCs (no UHC form required).

**NOTIFICATION / CERTIFICATION STATEMENTS** (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

|               |   |
|---------------|---|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>    | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>    | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| <b>C</b>      | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D</b>      | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E</b>      | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

12

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766/JK

EPA ID Number: C08213820725

LCCRD=  
Profile Number: 030718-SDW-001

**Waste Codes**

|  |  |  |                               |  |  |  |                               |
|--|--|--|-------------------------------|--|--|--|-------------------------------|
| <input checked="" type="checkbox"/> D001 | <input type="checkbox"/> D017            | <input type="checkbox"/> D032            | <input type="checkbox"/> F001 | <input type="checkbox"/> U002            | <input type="checkbox"/> U080            | <input type="checkbox"/> U205            | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002            | <input checked="" type="checkbox"/> D018 | <input type="checkbox"/> D033            | <input type="checkbox"/> F002 | <input type="checkbox"/> U003            | <input type="checkbox"/> U108            | <input type="checkbox"/> U206            | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019            | <input type="checkbox"/> D034            | <input type="checkbox"/> F003 | <input type="checkbox"/> U006            | <input type="checkbox"/> U115            | <input type="checkbox"/> U213            | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020            | <input checked="" type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007            | <input type="checkbox"/> U112            | <input type="checkbox"/> U218            | <input type="checkbox"/> P051 |
| <input checked="" type="checkbox"/> D005 | <input type="checkbox"/> D021            | <input type="checkbox"/> D036            | <input type="checkbox"/> F005 | <input type="checkbox"/> U010            | <input type="checkbox"/> U122            | <input type="checkbox"/> U220            | <input type="checkbox"/> P081 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022            | <input type="checkbox"/> D037            | <input type="checkbox"/> F006 | <input type="checkbox"/> U011            | <input type="checkbox"/> U123            | <input type="checkbox"/> U226            | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023            | <input type="checkbox"/> D038            | <input type="checkbox"/> F007 | <input checked="" type="checkbox"/> U031 | <input type="checkbox"/> U129            | <input type="checkbox"/> U228            | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024            | <input type="checkbox"/> D039            | <input type="checkbox"/> F008 | <input type="checkbox"/> U048            | <input type="checkbox"/> U136            | <input type="checkbox"/> U236            | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025            | <input type="checkbox"/> D040            | <input type="checkbox"/> F009 | <input type="checkbox"/> U052            | <input type="checkbox"/> U144            | <input checked="" type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026            | <input type="checkbox"/> D041            | <input type="checkbox"/> F010 | <input type="checkbox"/> U056            | <input type="checkbox"/> U147            | <input type="checkbox"/> U246            | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027            | <input type="checkbox"/> D042            | <input type="checkbox"/> F011 | <input type="checkbox"/> U069            | <input type="checkbox"/> U150            | <input type="checkbox"/> U279            | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028            | <input type="checkbox"/> D043            | <input type="checkbox"/> F012 | <input type="checkbox"/> U070            | <input checked="" type="checkbox"/> U159 | <input type="checkbox"/> U404            | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029            |  | <input type="checkbox"/> F019 | <input type="checkbox"/> U072            | <input type="checkbox"/> U161            |  |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030            |  | <input type="checkbox"/> F039 | <input type="checkbox"/> U076            | <input type="checkbox"/> U196            |  |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031            |  |                               | <input type="checkbox"/> U077            | <input type="checkbox"/> U202            |  |                               |
| <input type="checkbox"/> D016            |  |  |                               |  |  |  |                               |

**Underlying Hazardous Constituents**

- ☐The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐No UHCs are present upon generation.  
☒Disposal facility will check for all UHCs (no UHC form required).

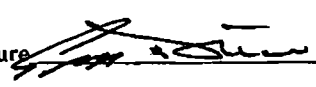
|   |  |
|---|--|
| <b>NOTIFICATION / CERTIFICATION STATEMENTS</b> (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |  |
| <b>A or X</b>   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| <b>B.1</b>  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>B.2</b>  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| <b>B.3</b>  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| <b>C.</b>   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above:<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| <b>D.</b>   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>E.</b>   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

LCCRO  
Profile Number: Cont.#100918-HLB-002

## Waste Codes

|  |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input checked="" type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108 | <input type="checkbox"/> U206 | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U112 | <input type="checkbox"/> U213 | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U115 | <input type="checkbox"/> U218 | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011 | <input type="checkbox"/> U123 | <input type="checkbox"/> U226 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U129 | <input type="checkbox"/> U228 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136 | <input type="checkbox"/> U236 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U061 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246 | <input type="checkbox"/> K901 |
| <input checked="" type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150 | <input type="checkbox"/> U279 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U154 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076 | <input type="checkbox"/> U196 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

## Underlying Hazardous Constituents

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
- ☐ No UHCs are present upon generation.
- ☒ Disposal facility will check for all UHCs (no UHC form required).

NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

|        |   |
|--------|---|
| A or X | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| A      |   |
| B.1    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2    | (CERTIFICATION REMOVED BY PHASE IV)   |
| B.3    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4    | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| C.     | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.     | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.     | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018



**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

14

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

Profile Number: LCCRC=050718-AMW-001

**Waste Codes**

|  |  |                               |                               |  |  |  |                               |
|--|--|-------------------------------|-------------------------------|--|--|--|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017            | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002            | <input type="checkbox"/> U080            | <input type="checkbox"/> U205            | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002            | <input checked="" type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003            | <input type="checkbox"/> U108            | <input type="checkbox"/> U206            | <input type="checkbox"/> P015 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019            | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006            | <input type="checkbox"/> U117            | <input type="checkbox"/> U213            | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020            | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007            | <input type="checkbox"/> U112            | <input type="checkbox"/> U218            | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021            | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010            | <input type="checkbox"/> U122            | <input type="checkbox"/> U220            | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022            | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011            | <input type="checkbox"/> U123            | <input checked="" type="checkbox"/> U223 | <input type="checkbox"/> P088 |
| <input checked="" type="checkbox"/> D007 | <input type="checkbox"/> D023            | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044            | <input type="checkbox"/> U129            | <input type="checkbox"/> U228            | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024            | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048            | <input type="checkbox"/> U136            | <input type="checkbox"/> U236            | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025            | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052            | <input type="checkbox"/> U144            | <input checked="" type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026            | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input checked="" type="checkbox"/> U055 | <input type="checkbox"/> U147            | <input type="checkbox"/> U246            | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027            | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069            | <input type="checkbox"/> U150            | <input type="checkbox"/> U279            | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028            | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070            | <input checked="" type="checkbox"/> U154 | <input type="checkbox"/> U404            | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029            |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072            | <input type="checkbox"/> U188            |  |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030            |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076            | <input type="checkbox"/> U196            |  |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031            |                               |                               | <input type="checkbox"/> U077            | <input type="checkbox"/> U202            |  |                               |
| <input type="checkbox"/> D016            |  |                               |                               |  |  |  |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

**NOTIFICATION / CERTIFICATION STATEMENTS** (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

|               |   |
|---------------|---|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>    | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>    | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| <b>C.</b>     | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D.</b>     | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E.</b>     | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 – F005) if disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

15

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

Profile Number: LCCRC=082318-WAC-001

| Waste Codes                              |                               |  |                               |  |  |  |  |
|--|-------------------------------|--|-------------------------------|--|--|--|--|
| <input checked="" type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032            | <input type="checkbox"/> F001 | <input type="checkbox"/> U002            | <input checked="" type="checkbox"/> U080 | <input type="checkbox"/> U205            | <input type="checkbox"/> P001            |
| <input type="checkbox"/> D002            | <input type="checkbox"/> D018 | <input type="checkbox"/> D033            | <input type="checkbox"/> F002 | <input type="checkbox"/> U003            | <input type="checkbox"/> U108            | <input type="checkbox"/> U206            | <input type="checkbox"/> P015            |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034            | <input type="checkbox"/> F003 | <input type="checkbox"/> U006            | <input checked="" type="checkbox"/> U111 | <input type="checkbox"/> U213            | <input checked="" type="checkbox"/> P024 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035            | <input type="checkbox"/> F004 | <input type="checkbox"/> U007            | <input type="checkbox"/> U112            | <input type="checkbox"/> U218            | <input type="checkbox"/> P051            |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036            | <input type="checkbox"/> F005 | <input type="checkbox"/> U010            | <input type="checkbox"/> U122            | <input type="checkbox"/> U220            | <input checked="" type="checkbox"/> P077 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037            | <input type="checkbox"/> F006 | <input checked="" type="checkbox"/> U012 | <input type="checkbox"/> U123            | <input checked="" type="checkbox"/> U223 | <input checked="" type="checkbox"/> P082 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input checked="" type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input checked="" type="checkbox"/> U021 | <input type="checkbox"/> U129            | <input type="checkbox"/> U228            | <input type="checkbox"/> P098            |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039            | <input type="checkbox"/> F008 | <input type="checkbox"/> U048            | <input type="checkbox"/> U136            | <input type="checkbox"/> U236            | <input type="checkbox"/> P105            |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040            | <input type="checkbox"/> F009 | <input type="checkbox"/> U052            | <input type="checkbox"/> U144            | <input checked="" type="checkbox"/> U239 | <input type="checkbox"/> P205            |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041            | <input type="checkbox"/> F010 | <input type="checkbox"/> U055            | <input type="checkbox"/> U147            | <input type="checkbox"/> U246            | <input type="checkbox"/> K901            |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042            | <input type="checkbox"/> F011 | <input type="checkbox"/> U069            | <input type="checkbox"/> U150            | <input type="checkbox"/> U279            | <input type="checkbox"/> K902            |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043            | <input type="checkbox"/> F012 | <input type="checkbox"/> U070            | <input checked="" type="checkbox"/> U154 | <input type="checkbox"/> U404            | <input type="checkbox"/> K903            |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |  | <input type="checkbox"/> F019 | <input type="checkbox"/> U072            | <input type="checkbox"/> U188            |  |  |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |  | <input type="checkbox"/> F039 | <input checked="" type="checkbox"/> U073 | <input type="checkbox"/> U196            |  |  |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |  |                               | <input type="checkbox"/> U077            | <input type="checkbox"/> U202            |  |  |
| <input type="checkbox"/> D016            |                               |  |                               |  |  |  |  |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

**NOTIFICATION / CERTIFICATION STATEMENTS** (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

|               |  |
|---------------|--|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>B.2</b>    | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| <b>B.3</b>    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>    | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| <b>C.</b>     | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| <b>D.</b>     | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>E.</b>     | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

16

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

Profile Number: LCCRC=100918-LDM-002

| Waste Codes                   |                               |                               |                               |                               |  |  |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|--|--|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080            | <input type="checkbox"/> U205            | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108            | <input type="checkbox"/> U206            | <input type="checkbox"/> P015 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U111            | <input type="checkbox"/> U213            | <input type="checkbox"/> P024 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U112            | <input type="checkbox"/> U218            | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U115            | <input type="checkbox"/> U220            | <input type="checkbox"/> P077 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U012 | <input checked="" type="checkbox"/> U122 | <input type="checkbox"/> U223            | <input type="checkbox"/> P082 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U021 | <input type="checkbox"/> U129            | <input type="checkbox"/> U228            | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U037 | <input type="checkbox"/> U136            | <input type="checkbox"/> U236            | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144            | <input checked="" type="checkbox"/> U244 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U055 | <input type="checkbox"/> U147            | <input type="checkbox"/> U246            | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150            | <input type="checkbox"/> U279            | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U159            | <input type="checkbox"/> U404            | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188            |  |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U073 | <input type="checkbox"/> U196            |  |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202            |  |                               |
| <input type="checkbox"/> D016 |                               |                               |                               |                               |  |  |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

|   |  |
|---|--|
| <b>NOTIFICATION / CERTIFICATION STATEMENTS</b> (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |  |
| <b>A or X</b>   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| <b>B.1</b>  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>B.2</b>  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| <b>B.3</b>  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(III)]</b><br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| <b>C.</b>   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| <b>D.</b>   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(I)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>E.</b>   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

17

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

Profile Number: LCCRC=051818-BSG-001

| Waste Codes                              |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002            | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108 | <input type="checkbox"/> U206 | <input type="checkbox"/> P015 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U111 | <input type="checkbox"/> U213 | <input type="checkbox"/> P024 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U112 | <input type="checkbox"/> U218 | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U115 | <input type="checkbox"/> U220 | <input type="checkbox"/> P077 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U012 | <input type="checkbox"/> U122 | <input type="checkbox"/> U223 | <input type="checkbox"/> P082 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U021 | <input type="checkbox"/> U129 | <input type="checkbox"/> U228 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U037 | <input type="checkbox"/> U136 | <input type="checkbox"/> U236 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144 | <input type="checkbox"/> U244 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U055 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246 | <input type="checkbox"/> K901 |
| <input checked="" type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150 | <input type="checkbox"/> U279 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U159 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U073 | <input type="checkbox"/> U196 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

**NOTIFICATION / CERTIFICATION STATEMENTS** (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

|               |   |
|---------------|---|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>    | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>    | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| <b>C.</b>     | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D.</b>     | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E.</b>     | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromono fluoromethane            |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

18

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

Profile Number: LCCRC=091918-CAT-006

| Waste Codes                              |  |                               |                               |  |                               |  |                               |
|--|--|-------------------------------|-------------------------------|--|-------------------------------|--|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017            | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002            | <input type="checkbox"/> U080 | <input type="checkbox"/> U205            | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002            | <input checked="" type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003            | <input type="checkbox"/> U108 | <input type="checkbox"/> U206            | <input type="checkbox"/> P015 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019            | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006            | <input type="checkbox"/> U117 | <input type="checkbox"/> U213            | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020            | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007            | <input type="checkbox"/> U112 | <input type="checkbox"/> U218            | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021            | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010            | <input type="checkbox"/> U122 | <input type="checkbox"/> U220            | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022            | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011            | <input type="checkbox"/> U123 | <input checked="" type="checkbox"/> U223 | <input type="checkbox"/> P088 |
| <input checked="" type="checkbox"/> D007 | <input type="checkbox"/> D023            | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044            | <input type="checkbox"/> U129 | <input type="checkbox"/> U228            | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024            | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048            | <input type="checkbox"/> U136 | <input type="checkbox"/> U236            | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025            | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052            | <input type="checkbox"/> U144 | <input checked="" type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026            | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input checked="" type="checkbox"/> U055 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246            | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027            | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069            | <input type="checkbox"/> U150 | <input type="checkbox"/> U279            | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028            | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070            | <input type="checkbox"/> U154 | <input type="checkbox"/> U404            | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029            |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072            | <input type="checkbox"/> U188 |  |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030            |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076            | <input type="checkbox"/> U196 |  |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031            |                               |                               | <input type="checkbox"/> U077            | <input type="checkbox"/> U202 |  |                               |
| <input type="checkbox"/> D016            |  |                               |                               |  |                               |  |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
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|--|---|
| <b>A or X</b>  | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>B.1</b>   | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>   | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>   | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>   | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| <b>C.</b>  | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| <b>D.</b>  | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E.</b>  | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

19

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

Profile Number: LCCRC-051818-CMG-001

| Waste Codes                   |  |                               |                               |                               |                               |                               |                               |
|-------------------------------|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017            | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input checked="" type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108 | <input type="checkbox"/> U206 | <input type="checkbox"/> P015 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019            | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U111 | <input type="checkbox"/> U213 | <input type="checkbox"/> P024 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020            | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U112 | <input type="checkbox"/> U218 | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021            | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122 | <input type="checkbox"/> U220 | <input type="checkbox"/> P077 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022            | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U012 | <input type="checkbox"/> U123 | <input type="checkbox"/> U223 | <input type="checkbox"/> P082 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023            | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U021 | <input type="checkbox"/> U129 | <input type="checkbox"/> U228 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024            | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U031 | <input type="checkbox"/> U136 | <input type="checkbox"/> U236 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025            | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026            | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U055 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027            | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150 | <input type="checkbox"/> U279 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028            | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U159 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029            |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030            |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U073 | <input type="checkbox"/> U196 |                               |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031            |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202 |                               |                               |
| <input type="checkbox"/> D016 |  |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

**NOTIFICATION / CERTIFICATION STATEMENTS** (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

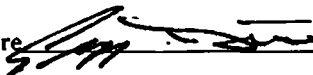
|               |  |
|---------------|--|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>B.2</b>    | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| <b>B.3</b>    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>    | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| <b>C.</b>     | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| <b>D.</b>     | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>E.</b>     | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

**Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

20

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

Profile Number: LCCRC=032218-BSS-009

| Waste Codes                              |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108 | <input type="checkbox"/> U206 | <input type="checkbox"/> P015 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U111 | <input type="checkbox"/> U213 | <input type="checkbox"/> P024 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U112 | <input type="checkbox"/> U218 | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122 | <input type="checkbox"/> U220 | <input type="checkbox"/> P077 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U012 | <input type="checkbox"/> U123 | <input type="checkbox"/> U223 | <input type="checkbox"/> P082 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U021 | <input type="checkbox"/> U129 | <input type="checkbox"/> U228 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136 | <input type="checkbox"/> U236 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U055 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150 | <input type="checkbox"/> U279 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U154 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U073 | <input type="checkbox"/> U196 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

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☐ No UHCs are present upon generation.

☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
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| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromono fluoromethane            |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

LCCRD=  
Profile Number: 052418-KRS-002

**Waste Codes**

|  |                               |                               |                               |  |                               |  |                               |
|--|-------------------------------|-------------------------------|-------------------------------|--|-------------------------------|--|-------------------------------|
| <input checked="" type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input checked="" type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205            | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002            | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003            | <input type="checkbox"/> U108 | <input type="checkbox"/> U206            | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006            | <input type="checkbox"/> U115 | <input type="checkbox"/> U213            | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007            | <input type="checkbox"/> U112 | <input type="checkbox"/> U218            | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010            | <input type="checkbox"/> U122 | <input checked="" type="checkbox"/> U220 | <input type="checkbox"/> P081 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011            | <input type="checkbox"/> U123 | <input type="checkbox"/> U226            | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044            | <input type="checkbox"/> U129 | <input type="checkbox"/> U228            | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048            | <input type="checkbox"/> U136 | <input type="checkbox"/> U236            | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052            | <input type="checkbox"/> U144 | <input type="checkbox"/> U244            | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input checked="" type="checkbox"/> U056 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246            | <input type="checkbox"/> K9C1 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069            | <input type="checkbox"/> U150 | <input type="checkbox"/> U279            | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070            | <input type="checkbox"/> U154 | <input type="checkbox"/> U404            | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072            | <input type="checkbox"/> U188 |  |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076            | <input type="checkbox"/> U196 |  |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U077            | <input type="checkbox"/> U202 |  |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |  |                               |  |                               |

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|               |   |
|---------------|---|
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| <b>A</b>      |   |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
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| <b>B.3</b>    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
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|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018



**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

22

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

LCCRD=

EPA ID Number: C08213820725

Profile Number: 032318-LDM-001

**Waste Codes**

|  |  |                               |                               |                               |  |  |                               |
|--|--|-------------------------------|-------------------------------|-------------------------------|--|--|-------------------------------|
| <input checked="" type="checkbox"/> D001 | <input type="checkbox"/> D017            | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080            | <input type="checkbox"/> U205            | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002            | <input checked="" type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108            | <input type="checkbox"/> U206            | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019            | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U117            | <input type="checkbox"/> U213            | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020            | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U112            | <input type="checkbox"/> U218            | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021            | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122            | <input type="checkbox"/> U220            | <input type="checkbox"/> P081 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022            | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011 | <input type="checkbox"/> U123            | <input type="checkbox"/> U226            | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023            | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U129            | <input type="checkbox"/> U228            | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024            | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136            | <input type="checkbox"/> U236            | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025            | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144            | <input checked="" type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026            | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U056 | <input type="checkbox"/> U147            | <input type="checkbox"/> U246            | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027            | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150            | <input type="checkbox"/> U279            | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028            | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U154            | <input type="checkbox"/> U404            | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029            |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input checked="" type="checkbox"/> U161 |  |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030            |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076 | <input type="checkbox"/> U196            |  |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031            |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202            |  |                               |
| <input type="checkbox"/> D016            |  |                               |                               |                               |  |  |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

**NOTIFICATION / CERTIFICATION STATEMENTS** (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

|               |  |
|---------------|--|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>B.2</b>    | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| <b>B.3</b>    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>    | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| <b>C.</b>     | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| <b>D.</b>     | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>E.</b>     | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

**Solvent Constituents (F001 - F005) if disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

Profile Number: 032018-SRC-002

## Waste Codes

|  |                               |                               |                               |  |                               |  |                               |
|--|-------------------------------|-------------------------------|-------------------------------|--|-------------------------------|--|-------------------------------|
| <input checked="" type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input checked="" type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205            | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002            | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003            | <input type="checkbox"/> U108 | <input type="checkbox"/> U206            | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006            | <input type="checkbox"/> U115 | <input type="checkbox"/> U213            | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007            | <input type="checkbox"/> U112 | <input type="checkbox"/> U218            | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010            | <input type="checkbox"/> U122 | <input checked="" type="checkbox"/> U220 | <input type="checkbox"/> P081 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011            | <input type="checkbox"/> U123 | <input type="checkbox"/> U226            | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U031            | <input type="checkbox"/> U129 | <input type="checkbox"/> U228            | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048            | <input type="checkbox"/> U136 | <input type="checkbox"/> U236            | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052            | <input type="checkbox"/> U144 | <input checked="" type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U056            | <input type="checkbox"/> U147 | <input type="checkbox"/> U246            | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069            | <input type="checkbox"/> U150 | <input type="checkbox"/> U279            | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070            | <input type="checkbox"/> U159 | <input type="checkbox"/> U404            | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072            | <input type="checkbox"/> U161 |  |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076            | <input type="checkbox"/> U196 |  |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U077            | <input type="checkbox"/> U202 |  |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |  |                               |  |                               |

## Underlying Hazardous Constituents

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
- ☐ No UHCs are present upon generation.
- ☒ Disposal facility will check for all UHCs (no UHC form required).

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|               |  |
|---------------|--|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>B.2</b>    | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| <b>B.3</b>    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
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| <b>C.</b>     | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| <b>D.</b>     | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>E.</b>     | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

Solvent Constituents (F001 – F005) if disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> o-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

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## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

Profile Number: LCCRO Cont.#100918-HLB-004

## Waste Codes

|  |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input checked="" type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108 | <input type="checkbox"/> U206 | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U112 | <input type="checkbox"/> U213 | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U115 | <input type="checkbox"/> U218 | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011 | <input type="checkbox"/> U123 | <input type="checkbox"/> U226 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U129 | <input type="checkbox"/> U228 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136 | <input type="checkbox"/> U236 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U061 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246 | <input type="checkbox"/> K901 |
| <input checked="" type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150 | <input type="checkbox"/> U279 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U154 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076 | <input type="checkbox"/> U196 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

## Underlying Hazardous Constituents

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
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|               |   |
|---------------|---|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>    | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>    | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| <b>C.</b>     | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D.</b>     | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E.</b>     | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

25

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

LCCRD=

EPA ID Number: C08213820725

Profile Number: 051118-JRM-036

**Waste Codes**

|  |                               |                               |                               |                               |  |                               |  |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|--|-------------------------------|--|
| <input checked="" type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080            | <input type="checkbox"/> U205 | <input type="checkbox"/> P001            |
| <input type="checkbox"/> D002            | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108            | <input type="checkbox"/> U206 | <input type="checkbox"/> P012            |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U117            | <input type="checkbox"/> U213 | <input type="checkbox"/> P030            |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U112            | <input type="checkbox"/> U218 | <input type="checkbox"/> P051            |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122            | <input type="checkbox"/> U220 | <input checked="" type="checkbox"/> P081 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011 | <input type="checkbox"/> U123            | <input type="checkbox"/> U226 | <input type="checkbox"/> P088            |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U129            | <input type="checkbox"/> U228 | <input type="checkbox"/> P098            |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136            | <input type="checkbox"/> U236 | <input type="checkbox"/> P105            |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144            | <input type="checkbox"/> U239 | <input type="checkbox"/> P205            |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U056 | <input type="checkbox"/> U147            | <input type="checkbox"/> U246 | <input type="checkbox"/> K901            |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150            | <input type="checkbox"/> U279 | <input type="checkbox"/> K902            |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input checked="" type="checkbox"/> U154 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903            |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188            |                               |  |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076 | <input type="checkbox"/> U196            |                               |  |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202            |                               |  |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |  |                               |  |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

|   |  |
|---|--|
| <b>NOTIFICATION / CERTIFICATION STATEMENTS</b> (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |  |
| <b>A or X</b>   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| <b>B.1</b>  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>B.2</b>  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| <b>B.3</b>  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| <b>C.</b>   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| <b>D.</b>   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>E.</b>   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

26

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

LCCRD=  
Profile Number: 100918-LDM-001

**Waste Codes**

|                               |                               |                               |                               |                               |  |  |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|--|--|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080            | <input type="checkbox"/> U205            | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108            | <input type="checkbox"/> U206            | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input checked="" type="checkbox"/> U115 | <input type="checkbox"/> U213            | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U112            | <input type="checkbox"/> U218            | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input checked="" type="checkbox"/> U122 | <input type="checkbox"/> U220            | <input type="checkbox"/> P081 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011 | <input type="checkbox"/> U123            | <input type="checkbox"/> U226            | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U129            | <input type="checkbox"/> U228            | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136            | <input type="checkbox"/> U236            | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144            | <input checked="" type="checkbox"/> U244 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U056 | <input type="checkbox"/> U147            | <input type="checkbox"/> U246            | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150            | <input type="checkbox"/> U279            | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U154            | <input type="checkbox"/> U404            | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188            |  |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076 | <input type="checkbox"/> U196            |  |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202            |  |                               |
| <input type="checkbox"/> D016 |                               |                               |                               |                               |  |  |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

**NOTIFICATION / CERTIFICATION STATEMENTS** (States authorized by EPA to manage the LOR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

|               |  |
|---------------|--|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>B.2</b>    | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| <b>B.3</b>    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>    | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| <b>C</b>      | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| <b>D</b>      | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>E</b>      | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

**Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

27

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

LCHG4

Profile Number: Cont. #051218-JRM-013

| Waste Codes                              |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108 | <input type="checkbox"/> U206 | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U115 | <input type="checkbox"/> U213 | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U112 | <input type="checkbox"/> U218 | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011 | <input type="checkbox"/> U123 | <input type="checkbox"/> U226 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U129 | <input type="checkbox"/> U228 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136 | <input type="checkbox"/> U236 | <input type="checkbox"/> P105 |
| <input checked="" type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U051 | <input type="checkbox"/> U144 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U061 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150 | <input type="checkbox"/> U279 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U151 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076 | <input type="checkbox"/> U196 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT (40 CFR §268.7(a)(2))</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| A  |   |
| R.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS (40 CFR §268.7(b)(4))</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS (40 CFR §268.7(b)(4)(iii))</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS (40 CFR §268.7(b)(4)(v))</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE (40 CFR §268.7(a)(4))</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT (40 CFR §268.37(a)(3)(i))</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

28

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

WPR180505-001

Profile Number:

| Waste Codes                   |                               |  |                               |                               |                               |                               |  |
|-------------------------------|-------------------------------|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|--|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032            | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001            |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033            | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005            |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034            | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022            |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035            | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U211 | <input type="checkbox"/> P028            |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036            | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075            |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037            | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088            |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038            | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098            |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039            | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105            |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040            | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U228 | <input type="checkbox"/> P205            |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041            | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U128 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901            |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042            | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U159 | <input type="checkbox"/> K902            |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input checked="" type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input checked="" type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |  | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |  |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |  | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |  |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |  |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184 |                               |  |
| <input type="checkbox"/> D016 |                               |  |                               |                               |                               |                               |  |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
- ☐ No UHCs are present upon generation.
- ☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |  |
|--|--|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

**Solvent Constituents (F001 - F005) if disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

29

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766/JJK

EPA ID Number: C08213820725

LCCRA

Profile Number: Cont #050618-JMF-001

**Waste Codes**

|  |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108 | <input type="checkbox"/> U206 | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U117 | <input type="checkbox"/> U213 | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U112 | <input type="checkbox"/> U218 | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011 | <input type="checkbox"/> U123 | <input type="checkbox"/> U226 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U129 | <input type="checkbox"/> U228 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136 | <input type="checkbox"/> U236 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U061 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150 | <input type="checkbox"/> U279 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U154 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076 | <input type="checkbox"/> U196 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

|   |   |
|---|---|
| <b>NOTIFICATION / CERTIFICATION STATEMENTS</b> (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
| <b>A or X</b>   | <b>RESTRICTED WASTE REQUIRED TREATMENT</b> [40 CFR §268.7(a)(2)]<br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>A</b>  |   |
| <b>B.1</b>  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS</b> [40 CFR §268.7(b)(4)]<br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS</b> [40 CFR §268.7(b)(4)(iii)]<br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS</b> [40 CFR §268.7(b)(4)(v)]<br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| <b>C.</b>   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE</b> [40 CFR §268.7(a)(4)]<br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D.</b>   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT</b> [40 CFR §268.37(a)(3)(i)]<br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E.</b>   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018



**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

30

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

Profile Number: LCCRB  
Cont. #082318-WAC-003

**Waste Codes**

|  |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108 | <input type="checkbox"/> U206 | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U112 | <input type="checkbox"/> U213 | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U115 | <input type="checkbox"/> U218 | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011 | <input type="checkbox"/> U123 | <input type="checkbox"/> U226 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U129 | <input type="checkbox"/> U228 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136 | <input type="checkbox"/> U236 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U061 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150 | <input type="checkbox"/> U279 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U154 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076 | <input type="checkbox"/> U196 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

**NOTIFICATION / CERTIFICATION STATEMENTS** (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

|               |  |
|---------------|--|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>B.2</b>    | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| <b>B.3</b>    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>    | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| <b>C.</b>     | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| <b>D.</b>     | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>E.</b>     | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

31

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766J/K

EPA ID Number: C08213820725

Profile Number: LCCRA  
Cont. #051818-SJF-001

| Waste Codes                              |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108 | <input type="checkbox"/> U206 | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U117 | <input type="checkbox"/> U213 | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U112 | <input type="checkbox"/> U218 | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011 | <input type="checkbox"/> U123 | <input type="checkbox"/> U226 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U129 | <input type="checkbox"/> U228 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136 | <input type="checkbox"/> U236 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U061 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150 | <input type="checkbox"/> U279 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U154 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076 | <input type="checkbox"/> U196 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

**NOTIFICATION / CERTIFICATION STATEMENTS** (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

|               |  |
|---------------|--|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>B.2</b>    | <b>[CERTIFICATION REMOVED BY PHASE IV]</b>   |
| <b>B.3</b>    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(III)]</b><br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>    | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| <b>C.</b>     | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| <b>D.</b>     | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(I)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>E.</b>     | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

**Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

32

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JK

EPA ID Number: C08213820725

LCHG4

Profile Number: Cont. #051118-JRM-033

**Waste Codes**

|  |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002            | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108 | <input type="checkbox"/> U206 | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U115 | <input type="checkbox"/> U213 | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U112 | <input type="checkbox"/> U218 | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011 | <input type="checkbox"/> U123 | <input type="checkbox"/> U226 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U129 | <input type="checkbox"/> U228 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136 | <input type="checkbox"/> U236 | <input type="checkbox"/> P105 |
| <input checked="" type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U051 | <input type="checkbox"/> U144 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U061 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150 | <input type="checkbox"/> U279 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U151 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076 | <input type="checkbox"/> U196 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.

☐ No UHCs are present upon generation.

☒ Disposal facility will check for all UHCs (no UHC form required).

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|               |  |
|---------------|--|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>B.2</b>    | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| <b>B.3</b>    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>    | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| <b>C</b>      | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| <b>D</b>      | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>E</b>      | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

33

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

Profile Number: 032918-GLW-002

| Waste Codes                              |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input checked="" type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002            | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108 | <input type="checkbox"/> U206 | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U117 | <input type="checkbox"/> U213 | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U112 | <input type="checkbox"/> U218 | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122 | <input type="checkbox"/> U220 | <input type="checkbox"/> P081 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011 | <input type="checkbox"/> U123 | <input type="checkbox"/> U226 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U129 | <input type="checkbox"/> U228 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136 | <input type="checkbox"/> U236 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U056 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150 | <input type="checkbox"/> U279 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U154 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076 | <input type="checkbox"/> U196 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
- ☐ No UHCs are present upon generation.
- ☒ Disposal facility will check for all UHCs (no UHC form required).

|   |  |
|---|--|
| <b>NOTIFICATION / CERTIFICATION STATEMENTS</b> (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |  |
| <b>A or X</b>   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| <b>B.1</b>  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>B.2</b>  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| <b>B.3</b>  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| <b>C.</b>   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| <b>D.</b>   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>E.</b>   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

34

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766/JJK

EPA ID Number: C08213820725

LCCRD=  
Profile Number: 072518-DGG-002

**Waste Codes**

|  |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input checked="" type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002            | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108 | <input type="checkbox"/> U206 | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U117 | <input type="checkbox"/> U213 | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U112 | <input type="checkbox"/> U218 | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011 | <input type="checkbox"/> U123 | <input type="checkbox"/> U226 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U129 | <input type="checkbox"/> U228 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136 | <input type="checkbox"/> U236 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U061 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150 | <input type="checkbox"/> U279 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U154 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076 | <input type="checkbox"/> U196 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
- ☐ No UHCs are present upon generation.
- ☒ Disposal facility will check for all UHCs (no UHC form required).

**NOTIFICATION / CERTIFICATION STATEMENTS** (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

|               |   |
|---------------|---|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT</b> (40 CFR §268.7(a)(2))<br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS</b> (40 CFR §268.7(b)(4))<br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>    | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS</b> (40 CFR §268.7(b)(4)(III))<br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>    | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS</b> (40 CFR §268.7(b)(4)(v))<br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| <b>C.</b>     | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE</b> (40 CFR §268.7(a)(4))<br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D.</b>     | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT</b> (40 CFR §268.37(a)(3)(i))<br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E.</b>     | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

35

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

LCCRB  
Profile Number: Cont. #062918-LSH-001

**Waste Codes**

|  |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108 | <input type="checkbox"/> U206 | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U112 | <input type="checkbox"/> U213 | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U115 | <input type="checkbox"/> U218 | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011 | <input type="checkbox"/> U123 | <input type="checkbox"/> U226 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U129 | <input type="checkbox"/> U228 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136 | <input type="checkbox"/> U236 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U061 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150 | <input type="checkbox"/> U279 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U154 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076 | <input type="checkbox"/> U196 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

**NOTIFICATION / CERTIFICATION STATEMENTS** (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

|               |   |
|---------------|---|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>    | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>    | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| <b>C.</b>     | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D.</b>     | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E.</b>     | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

3637

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

Profile Number: R015\_000

**Waste Codes**

|                               |  |                               |                               |                               |                               |                               |                               |
|-------------------------------|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017            | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input checked="" type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108 | <input type="checkbox"/> U206 | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019            | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U117 | <input type="checkbox"/> U213 | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020            | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U112 | <input type="checkbox"/> U218 | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021            | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022            | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011 | <input type="checkbox"/> U123 | <input type="checkbox"/> U226 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023            | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U129 | <input type="checkbox"/> U228 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024            | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136 | <input type="checkbox"/> U236 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025            | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026            | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U061 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027            | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150 | <input type="checkbox"/> U279 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028            | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U154 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029            |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030            |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076 | <input type="checkbox"/> U196 |                               |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031            |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202 |                               |                               |
| <input type="checkbox"/> D016 |  |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| <b>A or X</b>  | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>A</b>   |   |
| <b>B.1</b>   | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>   | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>   | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>   | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| <b>C.</b>  | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D.</b>  | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E.</b>  | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature 

Date: 31-OCT-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

38

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

LCCRB  
Profile Number: Cont #091918-CAT-009

**Waste Codes**

|  |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108 | <input type="checkbox"/> U206 | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U112 | <input type="checkbox"/> U213 | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U115 | <input type="checkbox"/> U218 | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011 | <input type="checkbox"/> U123 | <input type="checkbox"/> U226 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U129 | <input type="checkbox"/> U228 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136 | <input type="checkbox"/> U236 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U061 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150 | <input type="checkbox"/> U279 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U154 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076 | <input type="checkbox"/> U196 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

**NOTIFICATION / CERTIFICATION STATEMENTS** (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

|               |  |
|---------------|--|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| <b>A</b>      |  |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>B.2</b>    | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| <b>B.3</b>    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>    | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| <b>C</b>      | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| <b>D</b>      | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>E</b>      | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

**Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: [Signature]

Date: 31-OCT-2018



**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

39

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923766JJK

EPA ID Number: C08213820725

LCCRA  
Profile Number: Cont #052118-PTP-001

**Waste Codes**

|  |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108 | <input type="checkbox"/> U206 | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U117 | <input type="checkbox"/> U213 | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U112 | <input type="checkbox"/> U218 | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011 | <input type="checkbox"/> U123 | <input type="checkbox"/> U226 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U129 | <input type="checkbox"/> U228 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136 | <input type="checkbox"/> U236 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U061 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150 | <input type="checkbox"/> U279 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U154 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076 | <input type="checkbox"/> U196 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

**NOTIFICATION / CERTIFICATION STATEMENTS** (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

|               |  |
|---------------|--|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>B.2</b>    | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| <b>B.3</b>    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>    | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| <b>C.</b>     | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| <b>D.</b>     | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>E.</b>     | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

**Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> o-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 31-OCT-2018

**Attachment 5**

**Inbound Manifest 010923781JJK**

V18112213

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>  |   | 1. Generator ID Number<br>CO8213820725                       | 2. Page 1 of<br>6 | 3. Emergency Response Phone<br>(719) 549-5656 | 4. Manifest Tracking Number<br>010923781 JJK |                 |      |      |
|--|---|--|-------------------|---|--|-----------------|------|------|
| 5. Generator's Name and Mailing Address<br>PUEBLO CHEMICAL DEPOT<br>45825 HIGHWAY 96 EAST ATTN: PSB<br>PUEBLO, CO 81006 UNITED STATES<br>Generator's Phone: 719-549-5678   |   | Generator's Site Address (if different than mailing address) |                   |   |  |                 |      |      |
| 6. Transporter 1 Company Name<br>CLEAN HARBORS ENVIRONMENTAL SERVICE   |   | U.S. EPA ID Number<br>MAD039322250                           |                   |   |  |                 |      |      |
| 7. Transporter 2 Company Name  |   | U.S. EPA ID Number   |                   |   |  |                 |      |      |
| 8. Designated Facility Name and Site Address<br>CLEAN HARBORS ENVIRONMENTAL SERVICES INC.<br>2247 SOUTH HIGHWAY 71<br>KIMBALL NE 69145 UNITED STATES<br>Facility's Phone: 308-236-8200   |   | U.S. EPA ID Number<br>NE0981723613                           |                   |   |  |                 |      |      |
| 9a. HM   | 9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))        | 10. Containers   |                   | 11. Total Quantity                            | 12. Unit Wt./Vol.                            | 13. Waste Codes |      |      |
|  |   | No.  | Type              |   |  |                 |      |      |
| X  | 1. UN2811, WASTE TOXIC SOLIDS, ORGANIC, N.O.S. (VINYL CHLORIDE), 6.1, II, 154   | 13   | DF                | 1105  | P  | D043            | K903 |      |
| X  | 2. UN2922, WASTE CORROSIVE LIQUIDS, TOXIC, N.O.S. (SULFURIC ACID, CHLOROFORM), 8, (6.1), II, 154                      | 2  | DF                | 25  | P  | D006            | D022 | D002 |
| X  | 3. UN2811, WASTE TOXIC SOLIDS, ORGANIC, N.O.S. (VINYL CHLORIDE, SPENT CARBON), 6.1, III, 154                          | 1  | DF                | 80  | P  | D043            | K903 |      |
| X  | 4. UN3077, WASTE ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S. (1,2-DICHLOROETHANE, VINYL CHLORIDE), 9, III, 171 | 1  | DF                | 60  | P  | D028            | D043 | K903 |
| 14. Special Handling Instructions and Additional Information<br>1:WPR131230_001 1X55DF, 2:WPR170411-001 2X5DF, 3:WPR180505-001 1X55DF 4:WPR180817-001 1X55DF   |   |  |                   |   |  |                 |      |      |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable International and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.<br>I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. |   |  |                   |   |  |                 |      |      |
| Generator's/Offeror's Printed/Typed Name<br>CLIFF BRICE  |   | Signature<br>  |                   |   | Month Day Year<br>11/15/18                   |                 |      |      |
| 16. International Shipments<br><input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.   |   | Port of entry/exit:<br>Date leaving U.S.:                    |                   |   |  |                 |      |      |
| 17. Transporter Acknowledgment of Receipt of Materials<br>Transporter 1 Printed/Typed Name<br>DAN DUMMILAS   |   | Signature<br>  |                   |   | Month Day Year<br>11/15/18                   |                 |      |      |
| Transporter 2 Printed/Typed Name   |   | Signature  |                   |   | Month Day Year                               |                 |      |      |
| 18. Discrepancy<br>18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection<br>Manifest Reference Number:   |   |  |                   |   |  |                 |      |      |
| 18b. Alternate Facility (or Generator)   |   | U.S. EPA ID Number   |                   |   |  |                 |      |      |
| Facility's Phone:  |   |  |                   |   |  |                 |      |      |
| 18c. Signature of Alternate Facility (or Generator)  |   | Month Day Year   |                   |   |  |                 |      |      |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)  |   |  |                   |   |  |                 |      |      |
| 1. H0410   |   | 2. H0410   |                   | 3. H0410                                      |  | 4. H0410        |      |      |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a<br>Printed/Typed Name<br>Jessica Eopli  |   |  |                   |   |  |                 |      |      |
| Signature<br>  |   | Month Day Year<br>11/16/18                                   |                   |   |  |                 |      |      |

|   |  |   |                           |   |                    |                  |                               |
|---|--|---|---------------------------|---|--------------------|------------------|-------------------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b><br>(Continuation Sheet)   |  | 21. Generator ID Number<br><b>C08213820725</b>  | 22. Page<br><b>2 of 6</b> | 23. Manifest Tracking Number<br><b>010823781JJK</b> |                    |                  |                               |
| 24. Generator's Name<br><b>PUEBLO CHEMICAL DEPOT</b>  |  |   |                           |   |                    |                  |                               |
| 25. Transporter _____ Company Name  |  |   |                           | U.S. EPA ID Number                                  |                    |                  |                               |
| 26. Transporter _____ Company Name  |  |   |                           | U.S. EPA ID Number                                  |                    |                  |                               |
| GENERATOR   | 27a. HM  | 27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))                           | 28. Containers            |   | 29. Total Quantity | 30. Unit WL/Vol. | 31. Waste Codes               |
|   |  |   | No.                       | Type  |                    |                  |                               |
|   | X  | UN3077, WASTE ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S. (1,2-DICHLOROETHANE, VINYL CHLORIDE), 9, III, 171                        | 1                         | DF  | 61                 | P                | D028 D043 K903                |
|   | X  | UN3077, WASTE ENVIRONMENTALLY HAZARDOUS SUBSTANCES, SOLID, N.O.S. (XENON ARC LAMPS WITH MERCURY), 9, III, 171                             | 1                         | DF  | 4                  | P                | D009                          |
|   | X  | UN1830, WASTE SULFURIC ACID, 8, II, 137   | 1                         | DF  | 10                 | P                | D002                          |
|   | X  | UN3264, WASTE CORROSIVE LIQUID, ACIDIC, INORGANIC, N.O.S. (NITRIC ACID SOLUTION, CHROMIUM), 8, II, 154                                    | 1                         | DF  | 6                  | P                | D002 D007                     |
|   | X  | UN1789, WASTE HYDROCHLORIC ACID, SOLUTION, 8, III, 154  | 1                         | DF  | 8                  | P                | D002                          |
|   | X  | UN1805, WASTE PHOSPHORIC ACID SOLUTION, 8, III, 154   | 1                         | DF  | 14                 | P                | D002                          |
|   | X  | UN2031, WASTE NITRIC ACID, OTHER THAN RED FUMING, WITH LESS THAN 65 PERCENT NITRIC ACID, 8, II, 157                                       | 2                         | DF  | 22                 | P                | D004 D005 D006 D007 D008 D009 |
|   | X  | UN3077, WASTE ENVIRONMENTALLY HAZARDOUS SUBSTANCES, SOLID, N.O.S. (VINYL CHLORIDE, BENZENE) 9, III, 171                                   | 1                         | DF  | 124                | P                | D004 D005 D006 D007 D008 D009 |
|   | X  | UN3264, WASTE CORROSIVE LIQUID, ACIDIC, INORGANIC, N.O.S. (NITRIC ACID SOLUTION), 8, II, 154  | 1                         | DF  | 6                  | P                | D002                          |
|   | X  | UN1830, WASTE SULFURIC ACID, 8, II, 137   | 1                         | DF  | 16                 | P                | D003 D002                     |
|   | 32. Special Handling Instructions and Additional Information<br>5:WPR180817-001 1X55DF, 6:WPR180830-001 1X25DF, 7:LCCRA 1X5DF, 8:LCCRA 1X5DF, 9:LCCRA 1X5DF, 10:LCCRA 1X5DF, 11:LCCRA 2X5DF, 12:LCCRC 1X55DF, 13:LCCRA 1X5DF, 14:LCCRA 1X5DF |   |                           |   |                    |                  |                               |
|   | TRANSPORTER  | 33. Transporter _____ Acknowledgment of Receipt of Materials<br>Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____ |                           |   |                    |                  |                               |
| 34. Transporter _____ Acknowledgment of Receipt of Materials<br>Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____ |  |   |                           |   |                    |                  |                               |
| DESIGNATED FACILITY   | 35. Discrepancy _____  |   |                           |   |                    |                  |                               |
|   | 36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)<br>5. H040 16. H141 17. H040 18. H040 19. H040<br>10. H040 11. H040 112. H040 113. H040 114. H040            |   |                           |   |                    |                  |                               |

|  |  |  |                           |   |                   |                        |
|--|--|--|---------------------------|---|-------------------|------------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b><br>(Continuation Sheet)  |  | 21. Generator ID Number<br><b>C08213820725</b> | 22. Page<br><b>3 of 6</b> | 23. Manifest Tracking Number<br><b>010823781JJK</b> |                   |                        |
| 24. Generator's Name<br><b>PUEBLO CHEMICAL DEPOT</b>   |  |  |                           |   |                   |                        |
| 25. Transporter _____ Company Name   |  |  |                           | U.S. EPA ID Number                                  |                   |                        |
| 26. Transporter _____ Company Name   |  |  |                           | U.S. EPA ID Number                                  |                   |                        |
| 27a. HM  | 27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))                        | 28. Containers<br>No. Type                     |                           | 29. Total Quantity                                  | 30. Unit Wt./Vol. | 31. Waste Codes        |
| X  | UN1789, WASTE HYDROCHLORIC ACID SOLUTION, 8, III, 157  | 1  | DF                        | 88  | P                 | D002                   |
| X  | UN1263, WASTE PAINT, 3, III, 128   | 1  | DF                        | 16  | P                 | D018 D001 U239         |
| X  | UN1263, WASTE PAINT, 3, III, 128   | 1  | DF                        | 39  | P                 | D018 D001              |
| X  | UN1760, WASTE CORROSIVE LIQUIDS, N.O.S. (HYDROCHLORIC ACID, GLYCINE), 8, III, 154  | 2  | DF                        | 23  | P                 | D002                   |
| X  | UN3265, WASTE CORROSIVE LIQUID, ACIDIC, ORGANIC, N.O.S. (POTASSIUM TETROXALATE DIHYDRATE, SODIUM THIOSULFATE PENTAHYDRATE), 8, II, 153 | 1  | DF                        | 18  | P                 | D002                   |
| X  | UN3265, WASTE CORROSIVE LIQUID, ACIDIC, ORGANIC, N.O.S. (METHANESULPHONIC ACID), 8, II, 153  | 1  | DF                        | 6   | P                 | D002                   |
| X  | UN1230, WASTE METHANOL SOLUTION, 3, II, (0.2 PPM POLYCHLORINATED BIPHENYLS, TSCA EXEMPT), 131  | 1  | DF                        | 7   | P                 | D001                   |
| X  | UN1992, WASTE FLAMMABLE LIQUIDS, TOXIC, N.O.S. (ISOOCTANE, 1,4-DICHLOROBENZENE-D4) 3, (6.1), II, 131                                   | 1  | DF                        | 7   | P                 | D027 D001 U080         |
| X  | UN1993, WASTE FLAMMABLE LIQUIDS, N.O.S. (ACETONE, TETRAHYDROFURAN), 3, II, 128   | 1  | DF                        | 4   | P                 | U057 D001 U002<br>U213 |
| X  | UN1993, WASTE FLAMMABLE LIQUIDS, N.O.S. (ACETONE, CYCLOHEXANONE), 3, II, 128   | 1  | DF                        | 7   | P                 | U057 D001 U002         |
| 32. Special Handling Instructions and Additional Information<br>15:LCCRA 1X5DF, 16:LCCRD 1X2.5DF, 17:LCCRD 1X12.2DF, 18:LCCRA 2X5DF, 19:LCCRC 1X5DF, 20:LCCRC 1X5DF,<br>21:LCCRD 1X5DF, 22:LCCRD 1X5DF, 23:LCCRD 1X2.5DF, 24:LCCRD 1X2.5DF |  |  |                           |   |                   |                        |
| 33. Transporter _____ Acknowledgment of Receipt of Materials<br>Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____  |  |  |                           |   |                   |                        |
| 34. Transporter _____ Acknowledgment of Receipt of Materials<br>Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____  |  |  |                           |   |                   |                        |
| 35. Discrepancy  |  |  |                           |   |                   |                        |
| 36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)<br>15. H040 116. H040 117. H040 118. H040 119. H040<br>120. H040 121. H040 122. H040 123. H040 124. H040   |  |  |                           |   |                   |                        |

| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b><br>(Continuation Sheet)   |   | 21. Generator ID Number<br>C08213820725 | 22. Page<br>4 of 6 | 23. Manifest Tracking Number<br>010923781JJK |                   |                 |      |      |
|---|---|---|--------------------|--|-------------------|-----------------|------|------|
| 24. Generator's Name<br>PUEBLO CHEMICAL DEPOT   |   |   |                    |  |                   |                 |      |      |
| 25. Transporter _____ Company Name  |   |   |                    | U.S. EPA ID Number                           |                   |                 |      |      |
| 26. Transporter _____ Company Name  |   |   |                    | U.S. EPA ID Number                           |                   |                 |      |      |
| 27a.<br>HM  | 27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))                 | 28. Containers                          |                    | 29. Total Quantity                           | 30. Unit Wt./Vol. | 31. Waste Codes |      |      |
|   |   | No.                                     | Type               |  |                   |                 |      |      |
| X   | UN3082, WASTE, ENVIRONMENTALLY HAZARDOUS SUBSTANCES, LIQUID, N.O.S. (BENZENE), 9, III, 171                                      | 1                                       | DF                 | 15   | P                 | D018            |      |      |
| X   | UN3077, WASTE ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S. (XYLENE, ETHYLBENZENE), 9, III, 171                            | 1                                       | DF                 | 12   | P                 | D018            | U239 |      |
| X   | UN1824, WASTE SODIUM HYDROXIDE SOLUTION, 8, II, 154   | 1                                       | DF                 | 16   | P                 | D002            |      |      |
| X   | UN1824, WASTE SODIUM HYDROXIDE SOLUTION, 8, II, 154   | 1                                       | DF                 | 99   | P                 | D002            |      |      |
| X   | UN3267, WASTE CORROSIVE LIQUID, BASIC, ORGANIC, N.O.S. (PHENCL, 4-NONYL, BRANCHED, POLYOXYPROPYLENEDIAMINE), 8, II, 153         | 1                                       | DF                 | 86   | P                 | D018            | D002 |      |
| X   | UN1824, WASTE SODIUM HYDROXIDE SOLUTION, 8, II, 154   | 1                                       | DF                 | 6  | P                 | D002            |      |      |
| X   | UN2736, WASTE AMINES, LIQUID, CORROSIVE, N.O.S. (2-METHYL-1,5-PENTANEDIAMINE), 8, II, 153                                       | 1                                       | DF                 | 11   | P                 | D002            |      |      |
| X   | UN1760, WASTE CORROSIVE LIQUIDS, N.O.S. (PHENOL, EPICHLOROHYDRIN), 8, III, 154  | 5                                       | DF                 | 629  | P                 | D018            | U041 | U188 |
| X   | UN3082, WASTE ENVIRONMENTALLY HAZARDOUS SUBSTANCES, LIQUID, N.O.S. (TERTAMETHYL THIURAM DISULFIDE, ETHYLENE OXIDE), 9, III, 171 | 3                                       | DF                 | 653  | P                 | U115            | U122 | U244 |
| X   | UN3082, WASTE ENVIRONMENTALLY HAZARDOUS SUBSTANCES, LIQUID, N.O.S. (TERTAMETHYL THIURAM DISULFIDE), 9, III, 171                 | 1                                       | DF                 | 8  | P                 | U244            |      |      |
| 32. Special Handling Instructions and Additional Information<br>25:LCRC 1X5DF, 26:LCRC 1X5DF, 27:LCRCB 1X5DF, 28:LCRCB 1X5DF, 29:LCRCB 1X5DF, 30:LCRCB 1X5DF,<br>31:LCRCB 1X5DF, 32:LCRCB 5X5DF, 33:LCRCB 3X5DF, 34:LCRC 1X5DF          |   |   |                    |  |                   |                 |      |      |
| 33. Transporter _____ Acknowledgment of Receipt of Materials<br>Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____   |   |   |                    |  |                   |                 |      |      |
| 34. Transporter _____ Acknowledgment of Receipt of Materials<br>Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____   |   |   |                    |  |                   |                 |      |      |
| 35. Discrepancy _____   |   |   |                    |  |                   |                 |      |      |
| 36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)<br>25. H040 126. H040 127. H040 128. H040 129. H040<br>30. H040 131. H040 132. H040 133. H040 134. H040 |   |   |                    |  |                   |                 |      |      |

| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b><br>(Continuation Sheet)   |   | 21. Generator ID Number<br><b>CO8213820725</b> | 22. Page<br><b>5 of 6</b> | 23. Manifest Tracking Number<br><b>010923781JK</b> |                  |                 |      |  |
|---|---|--|---------------------------|--|------------------|-----------------|------|--|
| 24. Generator's Name<br><b>PUEBLO CHEMICAL DEPOT</b>  |   |  |                           |  |                  |                 |      |  |
| 25. Transporter _____ Company Name  |   |  |                           | U.S. EPA ID Number                                 |                  |                 |      |  |
| 26. Transporter _____ Company Name  |   |  |                           | U.S. EPA ID Number                                 |                  |                 |      |  |
| 27a.<br>HM  | 27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))                   | 28. Containers                                 |                           | 29. Total Quantity                                 | 30. Unit WL/Vol. | 31. Waste Codes |      |  |
|   |   | No.  | Type                      |  |                  |                 |      |  |
| X   | UN3077, WASTE ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S. (CUMENE HYDROPEROXIDE, CUMENE), 9, III, 171                      | 1  | DF                        | 6  | P                | U055            | U056 |  |
| X   | UN3077, ENVIRONMENTALLY HAZARDOUS SUBSTANCES, SOLID, N.O.S. (MERCURY), 9, III, 171 (UNIVERSAL WASTE-MERCURY CONTAINING EQUIPMENT) | 4  | DF                        | 470  | P                |                 |      |  |
| X   | UN3262, CORROSIVE SOLID, BASIC, INORGANIC, N.O.S. (DISODIUM METASILICATE), 8, III, 154  | 1  | DF                        | 9  | P                |                 |      |  |
| X   | UN2967, SULFAMIC ACID MIXTURE, 8, III, 154  | 1  | DF                        | 6  | P                |                 |      |  |
| X   | UN3262, CORROSIVE SOLID, BASIC, INORGANIC, N.O.S. (DISODIUM METASILICATE), 8, III, 154  | 1  | DF                        | 16   | P                |                 |      |  |
| X   | UN3082, ENVIRONMENTALLY HAZARDOUS SUBSTANCE, LIQUID, N.O.S. (BUTYL BENZYL PHTHALATE), 9, III, 171                                 | 6  | DF                        | 824  | P                |                 |      |  |
| X   | UN1813, POTASSIUM HYDROXIDE, SOLID, 8, II, 154  | 1  | DF                        | 10   | P                |                 |      |  |
|   | NON DOT REGULATED   | 1  | DF                        | 73   | P                |                 |      |  |
|   | NON DOT REGULATED   | 1  | DF                        | 6  | P                |                 |      |  |
|   | NON DOT REGULATED   | 1  | DF                        | 9  | P                |                 |      |  |
| 32. Special Handling Instructions and Additional Information<br>35:LCCRC 1X5DF, 36:RO25 1X55DF, 2X12 2DF, 1X5DF, 37:LCCRB 1X5DF, 38:LCCRA 1X5DF, 39:LCCRB 1X2.5DF, 40:L<br>CCRC 6X55DF, 41:LCCRB 1X5DF, 42:LCCRC 1X55DF, 43:LCCRC 1X5DF, 44:LCCRC 1X5DF |   |  |                           |  |                  |                 |      |  |
| 33. Transporter _____ Acknowledgment of Receipt of Materials<br>Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____   |   |  |                           |  |                  |                 |      |  |
| 34. Transporter _____ Acknowledgment of Receipt of Materials<br>Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____   |   |  |                           |  |                  |                 |      |  |
| 35. Discrepancy _____   |   |  |                           |  |                  |                 |      |  |
| 36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)<br>35. H040 36. H141 37. H040 38. H040 39. H040<br>40. H040 41. H040 42. H040 43. H040 44. H040                         |   |  |                           |  |                  |                 |      |  |

|  |  |   |                    |  |                    |                  |                 |
|--|--|---|--------------------|--|--------------------|------------------|-----------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b><br>(Continuation Sheet)  |  | 21. Generator ID Number<br>C08213820725   | 22. Page<br>6 of 6 | 23. Manifest Tracking Number<br>010923781JJK |                    |                  |                 |
| 24. Generator's Name<br>PUEBLO CHEMICAL DEPOT  |  |   |                    |  |                    |                  |                 |
| 25. Transporter _____ Company Name   |  |   |                    | U.S. EPA ID Number                           |                    |                  |                 |
| 26. Transporter _____ Company Name   |  |   |                    | U.S. EPA ID Number                           |                    |                  |                 |
| GENERATOR  | 27a.<br>HM   | 27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 28. Containers     |  | 29. Total Quantity | 30. Unit WL/Vol. | 31. Waste Codes |
|  |  | NON DOT REGULATED   | No.<br>5           | Type<br>DM                                   | 775                | P                |                 |
|  |  | NON DOT REGULATED   | 1                  | DM   | 115                | P                |                 |
|  |  |   |                    |  |                    |                  |                 |
|  |  |   |                    |  |                    |                  |                 |
|  |  |   |                    |  |                    |                  |                 |
|  |  |   |                    |  |                    |                  |                 |
|  |  |   |                    |  |                    |                  |                 |
|  |  |   |                    |  |                    |                  |                 |
|  |  |   |                    |  |                    |                  |                 |
|  |  |   |                    |  |                    |                  |                 |
|  |  |   |                    |  |                    |                  |                 |
| 32. Special Handling Instructions and Additional Information<br>45: WPR140312-001 5X55DM, 46: WPR140312-001 1X55DF |  |   |                    |  |                    |                  |                 |
| TRANSPORTER  | 33. Transporter _____ Acknowledgment of Receipt of Materials<br>Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____                |   |                    |  |                    |                  |                 |
|  | 34. Transporter _____ Acknowledgment of Receipt of Materials<br>Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____                |   |                    |  |                    |                  |                 |
| DESIGNATED FACILITY  | 35. Discrepancy _____  |   |                    |  |                    |                  |                 |
|  | 36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)<br>45: H0410 1416: H0410 |   |                    |  |                    |                  |                 |



**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923781JK

EPA ID Number: C08213820725

Profile Number: WPR131230\_001

**Waste Codes**

|                               |                               |  |                               |                               |                               |                               |  |
|-------------------------------|-------------------------------|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|--|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032            | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205 | <input type="checkbox"/> P001            |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033            | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108 | <input type="checkbox"/> U206 | <input type="checkbox"/> P012            |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034            | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U117 | <input type="checkbox"/> U213 | <input type="checkbox"/> P030            |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035            | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U112 | <input type="checkbox"/> U218 | <input type="checkbox"/> P051            |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036            | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075            |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037            | <input type="checkbox"/> F006 | <input type="checkbox"/> U019 | <input type="checkbox"/> U123 | <input type="checkbox"/> U226 | <input type="checkbox"/> P088            |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038            | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U129 | <input type="checkbox"/> U228 | <input type="checkbox"/> P098            |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039            | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136 | <input type="checkbox"/> U236 | <input type="checkbox"/> P105            |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040            | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205            |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041            | <input type="checkbox"/> F010 | <input type="checkbox"/> U056 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246 | <input type="checkbox"/> K901            |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042            | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150 | <input type="checkbox"/> U279 | <input type="checkbox"/> K902            |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input checked="" type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U154 | <input type="checkbox"/> U404 | <input checked="" type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |  | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U165 |                               |  |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |  | <input type="checkbox"/> F039 | <input type="checkbox"/> U076 | <input type="checkbox"/> U196 |                               |  |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |  |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202 |                               |  |
| <input type="checkbox"/> D016 |                               |  |                               |                               |                               |                               |  |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

|   |  |
|---|--|
| <b>NOTIFICATION / CERTIFICATION STATEMENTS</b> (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |  |
| <b>A or X</b>   | <b>RESTRICTED WASTE REQUIRED TREATMENT</b> [40 CFR §268.7(a)(2)]<br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| <b>B.1</b>  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS</b> [40 CFR §268.7(b)(4)]<br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>B.2</b>  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| <b>B.3</b>  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS</b> [40 CFR §268.7(b)(4)(ii)]<br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS</b> [40 CFR §268.7(b)(4)(v)]<br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| <b>C.</b>   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE</b> [40 CFR §268.7(a)(4)]<br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| <b>D.</b>   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT</b> [40 CFR §268.37(a)(3)(i)]<br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>E.</b>   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 11-NOV-2018

# **LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923781J/K

EPA ID Number: C08213820725

Profile Number: WPR160830-001

| Waste Codes                              |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002            | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108 | <input type="checkbox"/> U206 | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U117 | <input type="checkbox"/> U213 | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U112 | <input type="checkbox"/> U218 | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011 | <input type="checkbox"/> U123 | <input type="checkbox"/> U226 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U129 | <input type="checkbox"/> U228 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136 | <input type="checkbox"/> U236 | <input type="checkbox"/> P105 |
| <input checked="" type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U061 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150 | <input type="checkbox"/> U279 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U154 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076 | <input type="checkbox"/> U196 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

## **Underlying Hazardous Constituents**

☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.

☐ No UHCs are present upon generation.

☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| <b>A or X</b>  | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>B.1</b>   | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>   | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>   | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>   | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| <b>C.</b>  | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D.</b>  | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E.</b>  | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

| Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here <input type="checkbox"/> |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone  | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene  | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol  | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide   | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride   | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene  | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> o-Cresol   | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)  | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

# **LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923781/JK  
WPR180505-001

EPA ID Number: C08213820725

Profile Number:

| Waste Codes                   |                               |  |                               |                               |                               |                               |  |
|-------------------------------|-------------------------------|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|--|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032            | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001            |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033            | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005            |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034            | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022            |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035            | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U211 | <input type="checkbox"/> P028            |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036            | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075            |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037            | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088            |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038            | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098            |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039            | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105            |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040            | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U228 | <input type="checkbox"/> P205            |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041            | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U128 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901            |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042            | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U159 | <input type="checkbox"/> K902            |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input checked="" type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input checked="" type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |  | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |  |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |  | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |  |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |  |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184 |                               |  |
| <input type="checkbox"/> D016 |                               |  |                               |                               |                               |                               |  |

## **Underlying Hazardous Constituents**

☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.

☐ No UHCs are present upon generation.

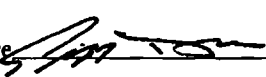
☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

| Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here <input type="checkbox"/> |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone  | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene  | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol  | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide   | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride   | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene  | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol   | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)  | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923781JK

EPA ID Number: C08213820725

Profile Number: WPR170411-001

| Waste Codes                              |  |                               |                               |                               |                               |                               |                               |
|--|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017            | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U080 | <input type="checkbox"/> U205 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018            | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U108 | <input type="checkbox"/> U206 | <input type="checkbox"/> P012 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019            | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U117 | <input type="checkbox"/> U213 | <input type="checkbox"/> P030 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020            | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U007 | <input type="checkbox"/> U112 | <input type="checkbox"/> U218 | <input type="checkbox"/> P051 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021            | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U122 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input checked="" type="checkbox"/> D006 | <input checked="" type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U011 | <input type="checkbox"/> U123 | <input type="checkbox"/> U226 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023            | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U129 | <input type="checkbox"/> U228 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024            | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U136 | <input type="checkbox"/> U236 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025            | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U052 | <input type="checkbox"/> U144 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026            | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U061 | <input type="checkbox"/> U147 | <input type="checkbox"/> U246 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027            | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U069 | <input type="checkbox"/> U150 | <input type="checkbox"/> U279 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028            | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U070 | <input type="checkbox"/> U154 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029            |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030            |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U076 | <input type="checkbox"/> U196 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031            |                               |                               | <input type="checkbox"/> U077 | <input type="checkbox"/> U202 |                               |                               |
| <input type="checkbox"/> D016            |  |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

|   |   |
|---|---|
| <b>NOTIFICATION / CERTIFICATION STATEMENTS</b> (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
| <b>A or X</b>   | <b>RESTRICTED WASTE REQUIRED TREATMENT</b> [40 CFR §268.7(a)(2)]<br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>B.1</b>  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS</b> [40 CFR §268.7(b)(4)]<br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS</b> [40 CFR §268.7(b)(4)(ii)]<br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
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| <b>C</b>  | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE</b> [40 CFR §268.7(a)(4)]<br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| <b>D</b>  | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT</b> [40 CFR §268.37(a)(3)(i)]<br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E</b>  | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here** ☒

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15 NOV 2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

**010923781JJK**

**Generator Name:** Pueblo Chemical Depot (PCAPP)

**Manifest Number:**

**EPA ID Number:** C08213820725

**Profile Number:** LCCRB  
CONT: 062218-JLL-002

| Waste Codes                              |  |                               |                               |                               |                               |                               |                               |
|--|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017            | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input checked="" type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019            | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020            | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021            | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022            | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023            | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024            | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025            | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U057 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026            | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U128 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027            | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028            | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029            |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030            |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031            |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184 |                               |                               |
| <input type="checkbox"/> D016            |  |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

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|--|---|
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| <b>B.2</b>   | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>   | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
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| <b>C.</b>  | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D.</b>  | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
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**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

**010923781JJK**

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: \_\_\_\_\_

EPA ID Number: C08213820725

Profile Number: LCCRB  
CONT: 100918-HLB-001

| Waste Codes                              |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U223 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U096 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U041 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U115 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U122 | <input type="checkbox"/> U244 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U244 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.

☐ No UHCs are present upon generation.

☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <b>[CERTIFICATION REMOVED BY PHASE IV]</b>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

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Date: 15-NOV-2018

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**010923781JJK**

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: \_\_\_\_\_

EPA ID Number: C08213820725

Profile Number: LCCRB  
CONT: 061318-PTP-002

| Waste Codes                              |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
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| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

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|               |   |
|---------------|---|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>X</b>      |   |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
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| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
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Title: Hazardous Waste Shipper

Signature: [Signature]

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**010923781JJK**

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: \_\_\_\_\_

EPA ID Number: C08213820725

LCCRB  
Profile Number: CONT: 071918-CAT-007

| Waste Codes                              |  |                               |                               |  |  |                               |                               |
|--|--|-------------------------------|-------------------------------|--|--|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017            | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002            | <input type="checkbox"/> U076            | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
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| <input type="checkbox"/> D011            | <input type="checkbox"/> D027            | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067            | <input type="checkbox"/> U138            | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
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|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018



## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

EPA ID Number: C08213820725

LCCRB  
Profile Number: CONT: 072618-DAL-003

| Waste Codes                              |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U057 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U128 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

## Underlying Hazardous Constituents

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
- ☐ No UHCs are present upon generation.
- ☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(H)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(V)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(I)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

| Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here <input type="checkbox"/> |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone  | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene  | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol  | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide   | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride   | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene  | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol   | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)  | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

010923781JJK

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number

EPA ID Number: C08213820725

Profile Number: LCCRB  
CONT: 071918-CAT-005

| Waste Codes                              |  |                               |                               |  |  |                               |                               |
|--|--|-------------------------------|-------------------------------|--|--|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017            | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002            | <input type="checkbox"/> U076            | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input checked="" type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003            | <input type="checkbox"/> U077            | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019            | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006            | <input type="checkbox"/> U078            | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020            | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009            | <input type="checkbox"/> U079            | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021            | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010            | <input type="checkbox"/> U080            | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022            | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037            | <input type="checkbox"/> U083            | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023            | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input checked="" type="checkbox"/> U041 | <input type="checkbox"/> U108            | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024            | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048            | <input type="checkbox"/> U117            | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025            | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U057            | <input type="checkbox"/> U118            | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026            | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066            | <input type="checkbox"/> U128            | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027            | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067            | <input type="checkbox"/> U138            | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028            | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068            | <input type="checkbox"/> U162            | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029            |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070            | <input type="checkbox"/> U165            |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030            |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071            | <input type="checkbox"/> U169            |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031            |                               |                               | <input type="checkbox"/> U072            | <input checked="" type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D016            |  |                               |                               |  |  |                               |                               |

## Underlying Hazardous Constituents

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
- ☐ No UHCs are present upon generation.
- ☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |  |
|--|--|
| A or X<br>X  | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| B.2  | (CERTIFICATION REMOVED BY PHASE IV)  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| C  | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| D  | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| E  | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

010923781JJK

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

EPA ID Number: C08213820725

LCCRB

Profile Number: CONT: 071918-CAT-006

| Waste Codes                              |  |                               |                               |  |  |                               |                               |
|--|--|-------------------------------|-------------------------------|--|--|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017            | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002            | <input type="checkbox"/> U076            | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input checked="" type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003            | <input type="checkbox"/> U077            | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019            | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006            | <input type="checkbox"/> U078            | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020            | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009            | <input type="checkbox"/> U079            | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021            | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010            | <input type="checkbox"/> U080            | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022            | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037            | <input type="checkbox"/> U083            | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023            | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input checked="" type="checkbox"/> U041 | <input type="checkbox"/> U108            | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024            | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048            | <input type="checkbox"/> U117            | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025            | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U057            | <input type="checkbox"/> U118            | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026            | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066            | <input type="checkbox"/> U128            | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027            | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067            | <input type="checkbox"/> U138            | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028            | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068            | <input type="checkbox"/> U162            | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029            |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070            | <input type="checkbox"/> U165            |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030            |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071            | <input type="checkbox"/> U169            |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031            |                               |                               | <input type="checkbox"/> U072            | <input checked="" type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D016            |  |                               |                               |  |  |                               |                               |

## Underlying Hazardous Constituents

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
- ☐ No UHCs are present upon generation.
- ☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| X  |   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(III)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

01092378133K

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 01092378133K

EPA ID Number: C08213820725

Profile Number: LCCRB  
CONT: 071918-CAT-008

| Waste Codes                              |  |                               |                               |  |  |                               |                               |
|--|--|-------------------------------|-------------------------------|--|--|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017            | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002            | <input type="checkbox"/> U076            | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input checked="" type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003            | <input type="checkbox"/> U077            | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019            | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006            | <input type="checkbox"/> U078            | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020            | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009            | <input type="checkbox"/> U079            | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021            | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010            | <input type="checkbox"/> U080            | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022            | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037            | <input type="checkbox"/> U083            | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023            | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input checked="" type="checkbox"/> U041 | <input type="checkbox"/> U108            | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024            | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048            | <input type="checkbox"/> U117            | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025            | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U057            | <input type="checkbox"/> U118            | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026            | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066            | <input type="checkbox"/> U128            | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027            | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067            | <input type="checkbox"/> U138            | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028            | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068            | <input type="checkbox"/> U162            | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029            |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070            | <input type="checkbox"/> U165            |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030            |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071            | <input type="checkbox"/> U169            |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031            |                               |                               | <input type="checkbox"/> U072            | <input checked="" type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D016            |  |                               |                               |  |  |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

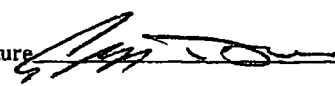
| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |  |
|--|--|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| X  |  |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(ii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(f)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

**Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

010923781JJK

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

EPA ID Number: C08213820725

Profile Number: LCCRB  
CONT: 071918-CAT-004

| Waste Codes                              |  |                               |                               |  |  |                               |                               |
|--|--|-------------------------------|-------------------------------|--|--|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017            | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002            | <input type="checkbox"/> U076            | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input checked="" type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003            | <input type="checkbox"/> U077            | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019            | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006            | <input type="checkbox"/> U078            | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020            | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009            | <input type="checkbox"/> U079            | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021            | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010            | <input type="checkbox"/> U080            | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022            | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037            | <input type="checkbox"/> U083            | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023            | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input checked="" type="checkbox"/> U041 | <input type="checkbox"/> U108            | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024            | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048            | <input type="checkbox"/> U117            | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025            | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U057            | <input type="checkbox"/> U118            | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026            | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066            | <input type="checkbox"/> U128            | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027            | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067            | <input type="checkbox"/> U138            | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028            | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068            | <input type="checkbox"/> U162            | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029            |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070            | <input type="checkbox"/> U165            |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030            |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071            | <input type="checkbox"/> U169            |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031            |                               |                               | <input type="checkbox"/> U072            | <input checked="" type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D016            |  |                               |                               |  |  |                               |                               |

## Underlying Hazardous Constituents

☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.☐ No UHCs are present upon generation.☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| X  |   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column S above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

**010923781JJK**

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: \_\_\_\_\_

EPA ID Number: C08213820725

Profile Number: LCCRB  
CONT: 063018-HLB-001

| Waste Codes                              |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U057 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U128 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| <b>A or X</b>  | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>B.1</b>   | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>   | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>   | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>   | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| <b>C.</b>  | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D.</b>  | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E.</b>  | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: \_\_\_\_\_

Date: 15-NOV-2018

010923781JJK

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

EPA ID Number: C08213820725

LCCRB  
Profile Number: CONT: 093018-RAM-003

| Waste Codes                   |                               |                               |                               |                               |                               |                               |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U223 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U096 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U041 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U115 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U122 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U244 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D016 |                               |                               |                               |                               |                               |                               |                               |

## Underlying Hazardous Constituents

☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.☐ No UHCs are present upon generation.☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(III)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(I)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

EPA ID Number: CO8213820725

Profile Number: LCCRB  
CONT: 060718-SAN-002

| Waste Codes                   |                               |                               |                               |                               |                               |                               |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U223 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U096 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U041 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U115 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U122 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U244 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D016 |                               |                               |                               |                               |                               |                               |                               |

## Underlying Hazardous Constituents

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
- ☐ No UHCs are present upon generation.
- ☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |  |
|--|--|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| X  |  |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(ii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

| Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here <input type="checkbox"/> |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone  | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene  | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol  | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide   | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride   | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene  | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol   | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)  | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature

Date: 15-NOV-2018



## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

LCCRB

EPA ID Number: C08213820725

Profile Number: CONT: 102318-AJM-002

## Waste Codes

|                               |                               |                               |                               |                               |                               |                               |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U223 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U096 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U041 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U115 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U122 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U244 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D016 |                               |                               |                               |                               |                               |                               |                               |

## Underlying Hazardous Constituents

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
- ☐ No UHCs are present upon generation.
- ☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(vi)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

**010923781JJK**

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

EPA ID Number: C08213820725

LCCRC

Profile Number: CONT: 090818-DMJ-002

| Waste Codes                   |                               |                               |                               |  |  |                               |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|--|--|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002            | <input type="checkbox"/> U076            | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003            | <input type="checkbox"/> U077            | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006            | <input type="checkbox"/> U078            | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009            | <input type="checkbox"/> U079            | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010            | <input type="checkbox"/> U080            | <input type="checkbox"/> U223 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037            | <input checked="" type="checkbox"/> U096 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U041            | <input type="checkbox"/> U108            | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048            | <input type="checkbox"/> U115            | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input checked="" type="checkbox"/> U055 | <input type="checkbox"/> U118            | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066            | <input type="checkbox"/> U122            | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067            | <input type="checkbox"/> U138            | <input type="checkbox"/> U244 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068            | <input type="checkbox"/> U162            | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070            | <input type="checkbox"/> U165            |                               |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071            | <input type="checkbox"/> U169            |                               |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072            | <input type="checkbox"/> U188            |                               |                               |
| <input type="checkbox"/> D016 |                               |                               |                               |  |  |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

|   |   |
|---|---|
| <b>NOTIFICATION / CERTIFICATION STATEMENTS</b> (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
| <b>A or X</b>   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>X</b>  |   |
| <b>B.1</b>  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| <b>C</b>  | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D</b>  | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E</b>  | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

010923781JJK

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

LCCRC

EPA ID Number: C08213820725

Profile Number: CONT: 090818-DMJ-001

| Waste Codes                              |  |  |                               |  |                               |  |                               |
|--|--|--|-------------------------------|--|-------------------------------|--|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017            | <input type="checkbox"/> D032            | <input type="checkbox"/> F001 | <input type="checkbox"/> U002            | <input type="checkbox"/> U076 | <input type="checkbox"/> U208            | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002            | <input checked="" type="checkbox"/> D018 | <input type="checkbox"/> D033            | <input type="checkbox"/> F002 | <input type="checkbox"/> U003            | <input type="checkbox"/> U077 | <input type="checkbox"/> U209            | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019            | <input type="checkbox"/> D034            | <input type="checkbox"/> F003 | <input type="checkbox"/> U006            | <input type="checkbox"/> U078 | <input type="checkbox"/> U210            | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020            | <input type="checkbox"/> D035            | <input type="checkbox"/> F004 | <input type="checkbox"/> U009            | <input type="checkbox"/> U079 | <input type="checkbox"/> U213            | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021            | <input type="checkbox"/> D036            | <input type="checkbox"/> F005 | <input type="checkbox"/> U010            | <input type="checkbox"/> U080 | <input checked="" type="checkbox"/> U223 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022            | <input type="checkbox"/> D037            | <input type="checkbox"/> F006 | <input type="checkbox"/> U037            | <input type="checkbox"/> U083 | <input type="checkbox"/> U225            | <input type="checkbox"/> P088 |
| <input checked="" type="checkbox"/> D007 | <input type="checkbox"/> D023            | <input type="checkbox"/> D038            | <input type="checkbox"/> F007 | <input type="checkbox"/> U041            | <input type="checkbox"/> U108 | <input type="checkbox"/> U226            | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024            | <input type="checkbox"/> D039            | <input type="checkbox"/> F008 | <input type="checkbox"/> U048            | <input type="checkbox"/> U115 | <input type="checkbox"/> U227            | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025            | <input type="checkbox"/> D040            | <input type="checkbox"/> F009 | <input checked="" type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input checked="" type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026            | <input type="checkbox"/> D041            | <input type="checkbox"/> F010 | <input type="checkbox"/> U066            | <input type="checkbox"/> U122 | <input type="checkbox"/> U161            | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027            | <input type="checkbox"/> D042            | <input type="checkbox"/> F011 | <input type="checkbox"/> U067            | <input type="checkbox"/> U138 | <input type="checkbox"/> U244            | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028            | <input checked="" type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068            | <input type="checkbox"/> U162 | <input type="checkbox"/> U404            | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029            |  | <input type="checkbox"/> F019 | <input type="checkbox"/> U070            | <input type="checkbox"/> U165 |  |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030            |  | <input type="checkbox"/> F039 | <input type="checkbox"/> U071            | <input type="checkbox"/> U169 |  |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031            |  |                               | <input type="checkbox"/> U072            | <input type="checkbox"/> U188 |  |                               |
| <input type="checkbox"/> D016            |  |  |                               |  |                               |  |                               |

## Underlying Hazardous Constituents

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| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| X  |   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
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| C  | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
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Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

**010923781JJK**

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: \_\_\_\_\_

EPA ID Number: C08213820725

Profile Number: LCCRC  
CONT: 070218-AJM-001

| Waste Codes                   |                               |                               |                               |                               |                               |  |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|--|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208            | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209            | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210            | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U213            | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220            | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225            | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U041 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226            | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U115 | <input type="checkbox"/> U227            | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U057 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239            | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U122 | <input type="checkbox"/> U161            | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input checked="" type="checkbox"/> U244 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404            | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |  |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |  |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |  |                               |
| <input type="checkbox"/> D016 |                               |                               |                               |                               |                               |  |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

|   |   |
|---|---|
| <b>NOTIFICATION / CERTIFICATION STATEMENTS</b> (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
| <b>A or X</b>   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>B.1</b>  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| <b>C.</b>   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column S above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D.</b>   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E.</b>   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

010923781JJK

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

EPA ID Number: C08213820725

Profile Number: LCCRC  
CONT: 071918-CAT-002

| Waste Codes                   |                               |                               |                               |                               |  |  |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|--|--|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076            | <input type="checkbox"/> U208            | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077            | <input type="checkbox"/> U209            | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078            | <input type="checkbox"/> U210            | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079            | <input type="checkbox"/> U213            | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080            | <input type="checkbox"/> U220            | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083            | <input type="checkbox"/> U225            | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U041 | <input type="checkbox"/> U108            | <input type="checkbox"/> U226            | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input checked="" type="checkbox"/> U115 | <input type="checkbox"/> U227            | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U057 | <input type="checkbox"/> U118            | <input type="checkbox"/> U239            | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input checked="" type="checkbox"/> U122 | <input type="checkbox"/> U161            | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138            | <input checked="" type="checkbox"/> U244 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162            | <input type="checkbox"/> U404            | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165            |  |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169            |  |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U188            |  |                               |
| <input type="checkbox"/> D016 |                               |                               |                               |                               |  |  |                               |

## Underlying Hazardous Constituents

☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.☐ No UHCs are present upon generation.☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| X  |   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <b>[CERTIFICATION REMOVED BY PHASE IV]</b>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

**U10923781JJK**

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number

LCCRC

EPA ID Number: C08213820725

Profile Number: CONT: 071918-CAT-001

| Waste Codes                   |                               |                               |                               |                               |  |  |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|--|--|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076            | <input type="checkbox"/> U208            | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077            | <input type="checkbox"/> U209            | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078            | <input type="checkbox"/> U210            | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079            | <input type="checkbox"/> U213            | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080            | <input type="checkbox"/> U220            | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083            | <input type="checkbox"/> U225            | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U041 | <input type="checkbox"/> U108            | <input type="checkbox"/> U226            | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input checked="" type="checkbox"/> U115 | <input type="checkbox"/> U227            | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U057 | <input type="checkbox"/> U118            | <input type="checkbox"/> U239            | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input checked="" type="checkbox"/> U122 | <input type="checkbox"/> U244            | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138            | <input checked="" type="checkbox"/> U244 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162            | <input type="checkbox"/> U404            | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165            |  |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169            |  |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U188            |  |                               |
| <input type="checkbox"/> D016 |                               |                               |                               |                               |  |  |                               |

**Underlying Hazardous Constituents**

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|--|--|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| X  |  |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(ii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column S above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
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**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

**010923781JJK**

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

EPA ID Number: C08213820725

Profile Number: LCCRC  
CONT: 071918-CAT-003

| Waste Codes                   |                               |                               |                               |                               |  |  |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|--|--|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076            | <input type="checkbox"/> U208            | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077            | <input type="checkbox"/> U209            | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078            | <input type="checkbox"/> U210            | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079            | <input type="checkbox"/> U213            | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080            | <input type="checkbox"/> U220            | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083            | <input type="checkbox"/> U225            | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U041 | <input type="checkbox"/> U108            | <input type="checkbox"/> U226            | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input checked="" type="checkbox"/> U115 | <input type="checkbox"/> U227            | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U057 | <input type="checkbox"/> U118            | <input type="checkbox"/> U239            | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input checked="" type="checkbox"/> U122 | <input type="checkbox"/> U161            | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138            | <input checked="" type="checkbox"/> U244 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162            | <input type="checkbox"/> U404            | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165            |  | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169            |  |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U188            |  |                               |
| <input type="checkbox"/> D016 |                               |                               |                               |                               |  |  |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| <b>A or X</b>  | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>B.1</b>   | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>   | <b>[CERTIFICATION REMOVED BY PHASE IV]</b>  |
| <b>B.3</b>   | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>   | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| <b>C.</b>  | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D.</b>  | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(ii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>E.</b>  | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

U10923781JK

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

010923781SK

EPA ID Number: C08213820725

Profile Number: LCCRC  
CONT: 060418-SRC-001

| Waste Codes                   |  |                               |                               |                               |                               |                               |                               |
|-------------------------------|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017            | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input checked="" type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019            | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020            | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021            | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022            | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023            | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024            | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025            | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U057 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026            | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U128 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027            | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028            | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029            |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030            |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031            |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184 |                               |                               |
| <input type="checkbox"/> D016 |  |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |  |
|--|--|
| A or X<br><br>X  | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(ii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| C  | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| D  | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| E  | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromono fluoromethane            |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018



010923781JJK

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

EPA ID Number: C08213820725

Profile Number: LCCRC  
CONT: 071718-CAT-003

| Waste Codes                              |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U211 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U128 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

## Underlying Hazardous Constituents

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
- ☐ No UHCs are present upon generation.
- ☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(H)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(V)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(I)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

| Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here <input type="checkbox"/> |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone  | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene  | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol  | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide   | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride   | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene  | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol   | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)  | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

EPA ID Number: C08213820725

Profile Number: LCCRC  
CONT: 062218-JLL-003

| Waste Codes                              |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U211 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U128 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

## Underlying Hazardous Constituents

☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.☐ No UHCs are present upon generation.☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

010923781JJK

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

LCCRC

EPA ID Number: C08213820725

Profile Number: CONT: 061218-ETF-001

| Waste Codes                   |  |                               |                               |                               |                               |  |                               |
|-------------------------------|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|--|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017            | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208            | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input checked="" type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209            | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019            | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210            | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020            | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U213            | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021            | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220            | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022            | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225            | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023            | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226            | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024            | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117 | <input type="checkbox"/> U227            | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025            | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U057 | <input type="checkbox"/> U118 | <input checked="" type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026            | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U128 | <input type="checkbox"/> U161            | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027            | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U159            | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028            | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404            | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029            |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |  |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030            |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |  |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031            |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184 |  |                               |
| <input type="checkbox"/> D016 |  |                               |                               |                               |                               |  |                               |

## Underlying Hazardous Constituents

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
- ☐ No UHCs are present upon generation.
- ☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| X  |   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(III)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| C  | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D  | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(I)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E  | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

010923781JJK

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number

EPA ID Number: C08213820725

Profile Number: LCCRC  
CONT: 082018-CAT-005

## Waste Codes

|                               |                               |                               |                               |                               |                               |                               |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U223 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U096 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U041 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U115 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U122 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U244 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D016 |                               |                               |                               |                               |                               |                               |                               |

## Underlying Hazardous Constituents

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
- ☐ No UHCs are present upon generation.
- ☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

010923781JJK

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

EPA ID Number: C08213820725

LCCRC  
Profile Number: CONT: 082018-CAT-001

| Waste Codes                   |                               |                               |                               |                               |                               |                               |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U223 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U096 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U041 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U115 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U122 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U244 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D016 |                               |                               |                               |                               |                               |                               |                               |

## Underlying Hazardous Constituents

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
- ☐ No UHCs are present upon generation.
- ☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| X  |   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <del>(CERTIFICATION REMOVED BY PHASE IV)</del>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> o-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

**010923781JJK**

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: \_\_\_\_\_

EPA ID Number: C08213820725

LCCRC

Profile Number: CONT: 082018-CAT-006

| Waste Codes                   |                               |                               |                               |                               |                               |                               |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U223 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U096 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U041 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U115 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U122 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U244 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D016 |                               |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
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**NOTIFICATION / CERTIFICATION STATEMENTS** (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

|               |   |
|---------------|---|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT</b> [40 CFR §268.7(a)(2)]<br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>X</b>      |   |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS</b> [40 CFR §268.7(b)(4)]<br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>    | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS</b> [40 CFR §268.7(b)(4)(iii)]<br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>    | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS</b> [40 CFR §268.7(b)(4)(v)]<br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| <b>C.</b>     | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE</b> [40 CFR §268.7(a)(4)]<br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D.</b>     | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT</b> [40 CFR §268.37(a)(3)(i)]<br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E.</b>     | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature 

Date: 15-NOV-2018

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number

EPA ID Number: C08213820725

LCCRC  
Profile Number: CONT: 082018-CAT-002

| Waste Codes                   |                               |                               |                               |                               |                               |                               |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U223 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U096 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U041 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U115 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U122 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U244 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D016 |                               |                               |                               |                               |                               |                               |                               |

## Underlying Hazardous Constituents

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
- ☐ No UHCs are present upon generation.
- ☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | (CERTIFICATION REMOVED BY PHASE IV)   |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

010923781JJK

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

EPA ID Number: C08213820725

LCCRC

Profile Number: CONT: 070218-GLW-001

| Waste Codes                   |                               |                               |                               |                               |                               |                               |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U223 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U096 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U041 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U115 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U122 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U244 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D016 |                               |                               |                               |                               |                               |                               |                               |

## Underlying Hazardous Constituents

☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.

☐ No UHCs are present upon generation.

☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |  |
|--|--|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| X  |  |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| C  | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| D  | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| E  | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromono-fluoromethane            |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018



## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

LCCRC

EPA ID Number: C08213820725

Profile Number: CONT: 101818-SDW-001

| Waste Codes                   |                               |                               |                               |                               |                               |                               |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U223 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U096 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U041 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U115 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U122 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U244 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D016 |                               |                               |                               |                               |                               |                               |                               |

## Underlying Hazardous Constituents

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
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- ☒ Disposal facility will check for all UHCs (no UHC form required).

**NOTIFICATION / CERTIFICATION STATEMENTS** (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

|               |  |
|---------------|--|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| <b>B.1</b>    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>B.2</b>    | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| <b>B.3</b>    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(ii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>    | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| <b>C</b>      | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| <b>D</b>      | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>E</b>      | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

010925/81JJK

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: \_\_\_\_\_

EPA ID Number: C08213820725

Profile Number: LCCRC  
CONT: 062918-CAT-003

| Waste Codes                   |                               |                               |                               |                               |                               |                               |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U223 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U096 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U041 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U115 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U122 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U244 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D016 |                               |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: \_\_\_\_\_

Date: 15-NOV-2018

010923781JJK

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

LCCRC

EPA ID Number: C08213820725

Profile Number: CONT: 082018-CAT-004

| Waste Codes                   |                               |                               |                               |                               |                               |                               |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> U035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U223 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U096 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U041 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U115 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U122 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U244 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D016 |                               |                               |                               |                               |                               |                               |                               |

## Underlying Hazardous Constituents

☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.

☐ No UHCs are present upon generation.

☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| X  |   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
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| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

Solvent Constituents (F001 - F005) if disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1-Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

010923781JJK

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

EPA ID Number: C08213820725

LCCRD  
Profile Number: CONT: 050918-WAC-001

| Waste Codes                              |  |                               |                               |                               |  |                               |                               |
|--|--|-------------------------------|-------------------------------|-------------------------------|--|-------------------------------|-------------------------------|
| <input checked="" type="checkbox"/> D001 | <input type="checkbox"/> D017            | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076            | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002            | <input type="checkbox"/> D018            | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077            | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019            | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078            | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020            | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079            | <input type="checkbox"/> U211 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021            | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input checked="" type="checkbox"/> U080 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022            | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083            | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023            | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108            | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024            | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117            | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025            | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118            | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026            | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U128            | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input checked="" type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138            | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028            | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162            | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029            |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165            |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030            |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169            |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031            |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184            |                               |                               |
| <input type="checkbox"/> D016            |  |                               |                               |                               |  |                               |                               |

## Underlying Hazardous Constituents

☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.☐ No UHCs are present upon generation.☒ Disposal facility will check for all UHCs (no UHC form required).

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|--|--|
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| X  |  |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
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| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
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Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

EPA ID Number: C08213820725

Profile Number: LCCRD  
CONT: 070318-SAN-001

## Waste Codes

|  |  |                               |                               |                               |                               |  |                               |
|--|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|--|-------------------------------|
| <input checked="" type="checkbox"/> D001 | <input type="checkbox"/> D017            | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208            | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002            | <input checked="" type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209            | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019            | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210            | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020            | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U211            | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021            | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220            | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022            | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225            | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023            | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226            | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024            | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117 | <input type="checkbox"/> U227            | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025            | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input checked="" type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026            | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U128 | <input type="checkbox"/> U161            | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027            | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U159            | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028            | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404            | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029            |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |  |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030            |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |  |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031            |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184 |  |                               |
| <input type="checkbox"/> D016            |  |                               |                               |                               |                               |  |                               |

## Underlying Hazardous Constituents

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
- ☐ No UHCs are present upon generation.
- ☒ Disposal facility will check for all UHCs (no UHC form required).

|   |   |
|---|---|
| <b>NOTIFICATION / CERTIFICATION STATEMENTS</b> (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
| <b>A or X</b>   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>B.1</b>  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| <b>C.</b>   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D.</b>   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E.</b>   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

U10923781JJK

010923781JJK

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: \_\_\_\_\_

EPA ID Number: C08213820725

Profile Number: LCCRD  
CONT: 031218-JRB-006

| Waste Codes                              |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input checked="" type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002            | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U211 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U128 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

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|--|---|
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| <b>B.1</b>   | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>   | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>   | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
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| <b>C</b>   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D</b>   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E</b>   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: \_\_\_\_\_

Date: 15-NOV-2018

010923781JJK

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

EPA ID Number: C08213820725

LCCRD  
Profile Number: CONT: 101818-CMG-001

| Waste Codes                              |  |                               |                               |                               |                               |                               |                               |
|--|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input checked="" type="checkbox"/> D001 | <input type="checkbox"/> D017            | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002            | <input checked="" type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019            | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020            | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U211 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021            | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022            | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023            | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024            | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025            | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026            | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U128 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027            | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028            | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029            |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030            |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031            |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184 |                               |                               |
| <input type="checkbox"/> D016            |  |                               |                               |                               |                               |                               |                               |

## Underlying Hazardous Constituents

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| X  |   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
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| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
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|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

010923781JJK

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number

EPA ID Number: CO8213820725

Profile Number: LCCRD  
CONT: 062918-CAT-002

## Waste Codes

|  |                               |                               |                               |  |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|--|-------------------------------|-------------------------------|-------------------------------|
| <input checked="" type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input checked="" type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002            | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003            | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006            | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009            | <input type="checkbox"/> U079 | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010            | <input type="checkbox"/> U080 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037            | <input type="checkbox"/> U083 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044            | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048            | <input type="checkbox"/> U117 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input checked="" type="checkbox"/> U057 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066            | <input type="checkbox"/> U128 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067            | <input type="checkbox"/> U138 | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068            | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070            | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071            | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072            | <input type="checkbox"/> U184 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |  |                               |                               |                               |

## Underlying Hazardous Constituents

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.
- ☐ No UHCs are present upon generation.
- ☒ Disposal facility will check for all UHCs (no UIIC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(H)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromono fluoromethane            |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018



**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

**010923781JJK**

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: \_\_\_\_\_

EPA ID Number: C08213820725

Profile Number: LCCRD  
CONT: 060518-DAL-001

| Waste Codes                              |                               |                               |                               |  |                               |  |                               |
|--|-------------------------------|-------------------------------|-------------------------------|--|-------------------------------|--|-------------------------------|
| <input checked="" type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input checked="" type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208            | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002            | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003            | <input type="checkbox"/> U077 | <input type="checkbox"/> U209            | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006            | <input type="checkbox"/> U078 | <input type="checkbox"/> U210            | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009            | <input type="checkbox"/> U079 | <input checked="" type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010            | <input type="checkbox"/> U080 | <input type="checkbox"/> U220            | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037            | <input type="checkbox"/> U083 | <input type="checkbox"/> U225            | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044            | <input type="checkbox"/> U108 | <input type="checkbox"/> U226            | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048            | <input type="checkbox"/> U117 | <input type="checkbox"/> U227            | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input checked="" type="checkbox"/> U057 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239            | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066            | <input type="checkbox"/> U128 | <input type="checkbox"/> U161            | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067            | <input type="checkbox"/> U138 | <input type="checkbox"/> U159            | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068            | <input type="checkbox"/> U162 | <input type="checkbox"/> U404            | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070            | <input type="checkbox"/> U165 |  |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071            | <input type="checkbox"/> U169 |  |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072            | <input type="checkbox"/> U184 |  |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |  |                               |  |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |  |
|--|--|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| X  |  |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>   |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(U)]</b><br>"I certify under penalty of law that I have personally examined and are familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(I)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: \_\_\_\_\_

Date: 15-NOV-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

010923781JJK

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number

EPA ID Number: C08213820725

LCCRA

Profile Number: CONT: 061018-WAC-003

| Waste Codes                              |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U211 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U228 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U128 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| <b>A or X</b>  | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>X</b>   |   |
| <b>B.1</b>   | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>   | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>   | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>   | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| <b>C.</b>  | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D.</b>  | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(f)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E.</b>  | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

01092378155K  
01092378155K

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

EPA ID Number: C08213820725

Profile Number: LCCRA  
CONT: 062218-JLL-004

| Waste Codes                              |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U211 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input checked="" type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U228 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U128 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| X  |   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

010923781JJK

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

EPA ID Number: CO8213820725

Profile Number: LCCRA  
CONT: 071718-CAT-002

| Waste Codes                              |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U211 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U228 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U128 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

## Underlying Hazardous Constituents

☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.☐ No UHCs are present upon generation.☒ Disposal facility will check for all UHCs (no UHC form required).

NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

|        |   |
|--------|---|
| A or X | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| B.1    | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2    | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| B.3    | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4    | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| C.     | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.     | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.     | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

U10923781JJK  
010923781JJK

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

EPA ID Number: C08213820725

Profile Number: LCCRA  
CONT: 071918-CAT-009

| Waste Codes                              |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U211 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U228 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U128 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

- ☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.  
☐ No UHCs are present upon generation.  
☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| <b>A or X</b>  | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| <b>X</b>   |   |
| <b>B.1</b>   | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| <b>B.2</b>   | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| <b>B.3</b>   | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| <b>B.4</b>   | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."   |
| <b>C</b>   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| <b>D</b>   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E</b>   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

**010923781JJK**

EPA ID Number: C08213820725

Profile Number: LCCRA  
CONT: 091818-IHF-001

| Waste Codes                              |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U211 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U128 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

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|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| X  |   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
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| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature 

Date: 15-NOV-2018

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923781JJK

EPA ID Number: C08213820725

Profile Number: LCCRA  
CONT: 050118-WAC-001

## Waste Codes

|  |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U211 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U128 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

## Underlying Hazardous Constituents

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|        |  |
|--------|--|
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| X      |  |
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| D.     | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
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Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature

Date: 15-NOV-2018

010923781JJK

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number

EPA ID Number: C08213820725

LCCRA  
Profile Number: CONT: 062218-JLL-012

| Waste Codes                              |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U211 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U228 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U128 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

## Underlying Hazardous Constituents

☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.☐ No UHCs are present upon generation.☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature

Date: 15-NOV-2018



**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

**U10923/81JJK**  
**01092378133R**

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: \_\_\_\_\_

EPA ID Number: C08213820725

LCRA  
Profile Number: CONT: 102918-MP-001

| Waste Codes                              |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003            | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U211 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U228 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U128 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

**Underlying Hazardous Constituents**

☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.

☐ No UHCs are present upon generation.

☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X<br><br>X  | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | (CERTIFICATION REMOVED BY PHASE IV)   |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(H)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 - F005) if disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: \_\_\_\_\_

Date: 15-NOV-2018

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

EPA ID Number: CO8213820725

Profile Number: LCCRA  
CONT: 102918-MV-002

| Waste Codes                              |                               |                               |                               |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001            | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input checked="" type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input checked="" type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004            | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U211 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005            | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006            | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007            | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008            | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009            | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U228 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010            | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U128 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011            | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U159 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012            | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013            | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014            | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015            | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184 |                               |                               |
| <input type="checkbox"/> D016            |                               |                               |                               |                               |                               |                               |                               |

## Underlying Hazardous Constituents

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|--|--|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."  |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| B.2  | (CERTIFICATION REMOVED BY PHASE IV)  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(ii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
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| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."  |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.   |

Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

010923781JJK

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number:

EPA ID Number: C08213820725

LCCRA  
Profile Number: CONT: 062218-JLL-007

| Waste Codes                   |                               |                               |                               |                               |                               |                               |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017 | <input type="checkbox"/> D032 | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001 |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018 | <input type="checkbox"/> D033 | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005 |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019 | <input type="checkbox"/> D034 | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020 | <input type="checkbox"/> D035 | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U213 | <input type="checkbox"/> P028 |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021 | <input type="checkbox"/> D036 | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U223 | <input type="checkbox"/> P075 |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022 | <input type="checkbox"/> D037 | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U096 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088 |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023 | <input type="checkbox"/> D038 | <input type="checkbox"/> F007 | <input type="checkbox"/> U041 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098 |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024 | <input type="checkbox"/> D039 | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U115 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105 |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025 | <input type="checkbox"/> D040 | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U239 | <input type="checkbox"/> P205 |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026 | <input type="checkbox"/> D041 | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U122 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901 |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027 | <input type="checkbox"/> D042 | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U244 | <input type="checkbox"/> K902 |
| <input type="checkbox"/> D012 | <input type="checkbox"/> D028 | <input type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029 |                               | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |                               |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030 |                               | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |                               |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031 |                               |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U188 |                               |                               |
| <input type="checkbox"/> D016 |                               |                               |                               |                               |                               |                               |                               |

## Underlying Hazardous Constituents

☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.☐ No UHCs are present upon generation.☒ Disposal facility will check for all UHCs (no UHC form required).

| NOTIFICATION / CERTIFICATION STATEMENTS (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.) |   |
|--|---|
| A or X   | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
| B.1  | <b>RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS [40 CFR §268.7(b)(4)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."   |
| B.2  | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
| B.3  | <b>GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS [40 CFR §268.7(b)(4)(iii)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the non-wastewater organic constituents have been treated by combustion units as specified in §268.42, Table 1. I have been unable to detect the non-wastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment." |
| B.4  | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
| C.   | <b>RESTRICTED WASTE SUBJECT TO A VARIANCE [40 CFR §268.7(a)(4)]</b><br>This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.<br><input type="checkbox"/> For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR §268.45."   |
| D.   | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| E.   | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

Solvent Constituents (F001 - F005) If disposal facility will check for all spent solvents check here ☐

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> o-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

**LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM**

Generator Name: Pueblo Chemical Depot (PCAPP)

Manifest Number: 010923781JJK

EPA ID Number: C08213820725

Profile Number: WPR180817-001

**Waste Codes**

|                               |  |  |                               |                               |                               |                               |  |
|-------------------------------|--|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|--|
| <input type="checkbox"/> D001 | <input type="checkbox"/> D017            | <input type="checkbox"/> D032            | <input type="checkbox"/> F001 | <input type="checkbox"/> U002 | <input type="checkbox"/> U076 | <input type="checkbox"/> U208 | <input type="checkbox"/> P001            |
| <input type="checkbox"/> D002 | <input type="checkbox"/> D018            | <input type="checkbox"/> D033            | <input type="checkbox"/> F002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U077 | <input type="checkbox"/> U209 | <input type="checkbox"/> P005            |
| <input type="checkbox"/> D003 | <input type="checkbox"/> D019            | <input type="checkbox"/> D034            | <input type="checkbox"/> F003 | <input type="checkbox"/> U006 | <input type="checkbox"/> U078 | <input type="checkbox"/> U210 | <input type="checkbox"/> P022            |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D020            | <input type="checkbox"/> D035            | <input type="checkbox"/> F004 | <input type="checkbox"/> U009 | <input type="checkbox"/> U079 | <input type="checkbox"/> U211 | <input type="checkbox"/> P028            |
| <input type="checkbox"/> D005 | <input type="checkbox"/> D021            | <input type="checkbox"/> D036            | <input type="checkbox"/> F005 | <input type="checkbox"/> U010 | <input type="checkbox"/> U080 | <input type="checkbox"/> U220 | <input type="checkbox"/> P075            |
| <input type="checkbox"/> D006 | <input type="checkbox"/> D022            | <input type="checkbox"/> D037            | <input type="checkbox"/> F006 | <input type="checkbox"/> U037 | <input type="checkbox"/> U083 | <input type="checkbox"/> U225 | <input type="checkbox"/> P088            |
| <input type="checkbox"/> D007 | <input type="checkbox"/> D023            | <input type="checkbox"/> D038            | <input type="checkbox"/> F007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U108 | <input type="checkbox"/> U226 | <input type="checkbox"/> P098            |
| <input type="checkbox"/> D008 | <input type="checkbox"/> D024            | <input type="checkbox"/> D039            | <input type="checkbox"/> F008 | <input type="checkbox"/> U048 | <input type="checkbox"/> U117 | <input type="checkbox"/> U227 | <input type="checkbox"/> P105            |
| <input type="checkbox"/> D009 | <input type="checkbox"/> D025            | <input type="checkbox"/> D040            | <input type="checkbox"/> F009 | <input type="checkbox"/> U055 | <input type="checkbox"/> U118 | <input type="checkbox"/> U228 | <input type="checkbox"/> P205            |
| <input type="checkbox"/> D010 | <input type="checkbox"/> D026            | <input type="checkbox"/> D041            | <input type="checkbox"/> F010 | <input type="checkbox"/> U066 | <input type="checkbox"/> U128 | <input type="checkbox"/> U161 | <input type="checkbox"/> K901            |
| <input type="checkbox"/> D011 | <input type="checkbox"/> D027            | <input type="checkbox"/> D042            | <input type="checkbox"/> F011 | <input type="checkbox"/> U067 | <input type="checkbox"/> U138 | <input type="checkbox"/> U159 | <input type="checkbox"/> K902            |
| <input type="checkbox"/> D012 | <input checked="" type="checkbox"/> D028 | <input checked="" type="checkbox"/> D043 | <input type="checkbox"/> F012 | <input type="checkbox"/> U068 | <input type="checkbox"/> U162 | <input type="checkbox"/> U404 | <input checked="" type="checkbox"/> K903 |
| <input type="checkbox"/> D013 | <input type="checkbox"/> D029            |  | <input type="checkbox"/> F019 | <input type="checkbox"/> U070 | <input type="checkbox"/> U165 |                               |  |
| <input type="checkbox"/> D014 | <input type="checkbox"/> D030            |  | <input type="checkbox"/> F039 | <input type="checkbox"/> U071 | <input type="checkbox"/> U169 |                               |  |
| <input type="checkbox"/> D015 | <input type="checkbox"/> D031            |  |                               | <input type="checkbox"/> U072 | <input type="checkbox"/> U184 |                               |  |
| <input type="checkbox"/> D016 |  |  |                               |                               |                               |                               |  |

**Underlying Hazardous Constituents**

☐ The "F039/Underlying Hazardous Constituents Form" has been used and provided to identify F039 or UHCs managed in non-CWA.

☐ No UHCs are present upon generation.

☒ Disposal facility will check for all UHCs (no UHC form required).

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|               |   |
|---------------|---|
| <b>A or X</b> | <b>RESTRICTED WASTE REQUIRED TREATMENT [40 CFR §268.7(a)(2)]</b><br>This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.<br><input type="checkbox"/> For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."   |
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| <b>B.2</b>    | <b>(CERTIFICATION REMOVED BY PHASE IV)</b>  |
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| <b>B.4</b>    | <b>DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS [40 CFR §268.7(b)(4)(v)]</b><br>"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR §268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."  |
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| <b>D.</b>     | <b>RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT [40 CFR §268.37(a)(3)(i)]</b><br>"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."  |
| <b>E.</b>     | <b>WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS</b><br>This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.  |

**Solvent Constituents (F001 – F005) If disposal facility will check for all spent solvents check here ☐**

|   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Acetone              | <input type="checkbox"/> Cyclohexanone     | <input type="checkbox"/> Methylene Chloride     | <input type="checkbox"/> 1,1,1 Trichloroethane                  |
| <input type="checkbox"/> Benzene              | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> Methyl Ethyl Ketone    | <input type="checkbox"/> 1,1,2-Trichloroethane                  |
| <input type="checkbox"/> n-Butyl alcohol      | <input type="checkbox"/> 2-Ethoxyethanol   | <input type="checkbox"/> Methyl Isobutyl Ketone | <input type="checkbox"/> 1,1,2-Trichloro, 1,2,2-trifluoroethane |
| <input type="checkbox"/> Carbon disulfide     | <input type="checkbox"/> Ethyl Acetate     | <input type="checkbox"/> Nitrobenzene           | <input type="checkbox"/> Trichloroethylene                      |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Ethyl Benzene     | <input type="checkbox"/> 2-Nitropropane         | <input type="checkbox"/> Trichloromonofluoromethane             |
| <input type="checkbox"/> Chlorobenzene        | <input type="checkbox"/> Ethyl Ether       | <input type="checkbox"/> Pyridine               | <input type="checkbox"/> Xylenes                                |
| <input type="checkbox"/> O-Cresol             | <input type="checkbox"/> Isobutanol        | <input type="checkbox"/> Tetrachloroethylene    |   |
| <input type="checkbox"/> Cresols (m & p)      | <input type="checkbox"/> Methanol          | <input type="checkbox"/> Toluene                |   |

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Title: Hazardous Waste Shipper

Signature: 

Date: 15-NOV-2018

**Attachment 6**

**WINWeb Drum Tracking Screens for Manifests 010923766JJK and  
010923781JJK**

**WSDRUM - Drum Viewing**[Properties](#) | [Composition](#) | [Tracking Activity](#) | [Instructions](#) | [Lab Results](#) | [History](#) | [Gen Rstrctns](#) | [Profile Rstrctns](#)Drum: Inventory Mgt #: **C000005695**Customer Drum #: Manifest Company: **KP**SO Branch: **C9** Sales Order #: **1805477212-001**Load #: **1811005**Manifest Number: **010923766JK-4**Manifest Line: **25**Lot #: **27027134**Manifest Status: **PR**Manifest Page: **4**Shipment Type: **DRUM**Profile: **LCCRD**UN / NA: **UN1993**Final Code Date: **11/8/2018 7:46:17 AM**Pre Waste Class: **LCCRD**Testing Waste Class: **LCCRD**Processing Waste Class: **LCCRD**Date Received: **11/1/2018 1:06:38 PM**Restrictions: **N**Billing Waste Class: **LCCRD**Container Size: **5**Container Type: **DF**Processing Status: **YES**Original Quantity: **6**Current Quantity: **0**Quantity UOM: **LBS**Drum Weight: **6**Weight UOM: **LBS**Tare Weight: **2**

PCB Type:

Out of Service:

Serial #:

Generator Company: **PU14100**Generator Date: **10/31/2018**Generator EPA #: **C08213820725**

Area:

Location: **KP**Initial Tracking Date: **11/1/2018 1:06:38 PM**Processing Type: **Mix Special**

Customer Batch #

Off-spec Reason:

Comments: **kw-lp-**

MFG SKU:

Waste Numbers:

Modified by **DUNEGANP**on **11/20/2018 5:09:41 PM**Created: **11/2/2018 1:07:46 PM**

**WSRVWTRK - View Tracking Activities**

[Home](#) | 
 [Properties](#) | 
 [Configuration](#) | 
 [Drum Viewing](#) | 
 [Manifests](#) | 
 [Lab Results](#) | 
 [Inventories](#) | 
 [General Settings](#) | 
 [Help](#)

Tracking Number: 69425541



| Del Loc | Activity | Qty | Drum / Tank<br>Vehicle | Actual Date            | Manifest #<br>Area | Profile # | Dspst Fclty | Entry Date             | User     |
|---------|----------|-----|------------------------|------------------------|--------------------|-----------|-------------|------------------------|----------|
| KP      | INCN     | 4   | TOU                    | 12/01/2018 07:13:53 PM |                    |           |             | 12/02/2018 06:48:08 PM | BROWERB  |
| KP      | TTTT     | 4   | H170B-E                | 11/30/2018 11:17:00 PM |                    |           |             | 12/01/2018 09:31:18 AM | NELSONJI |
| KP      | TTTT     | 4   | H170B                  | 11/30/2018 05:58:52 PM |                    |           |             | 11/30/2018 05:59:22 PM | NELSONJI |
| KP      | VHTK     | 4   | H170A                  | 11/30/2018 05:01:08 AM |                    |           |             | 11/30/2018 05:01:16 AM | JOHNSM10 |
| KP      | TKVH     | 4   | UPCU411114             | 11/24/2018 07:23:19 AM |                    |           |             | 11/24/2018 07:23:43 AM | MARTIJ17 |
| KP      | PUMP     | 4   | H150D                  | 11/20/2018 05:09:26 PM |                    |           |             | 11/20/2018 05:09:41 PM | DUNEGANP |
| KP      | INVT     |     |                        | 11/13/2018 10:29:32 AM | KP Van 56          |           |             | 11/13/2018 10:29:32 AM | WHYTSEB1 |
| KP      | INVT     |     |                        | 11/07/2018 05:23:23 PM | 57A:Row 4N         |           |             | 11/07/2018 05:23:23 PM | WESTK2   |
| KP      | INVT     |     |                        | 11/06/2018 06:45:37 PM | 25 Inbound:Slot 1  |           |             | 11/06/2018 06:45:37 PM | GIBSONJ5 |
| KP      | PREC     |     |                        | 11/01/2018 01:06:40 PM |                    |           |             | 11/02/2018 01:07:57 PM | GIBSONJ5 |
| KP      | RECV     |     |                        | 10/31/2018 12:00:00 AM |                    |           |             | 11/02/2018 01:07:46 PM | GIBSONJ5 |

**WSDRUM - Drum Viewing**[Properties](#) | [Composition](#) | [Tracking Activity](#) | [Instruments](#) | [Lab Results](#) | [History](#) | [Gen Restrictions](#) | [Profile Restrictions](#)Drum: 

Inventory Mgt #:

Customer Drum #:

Manifest Company: **KP**SO Branch: **D9** Sales Order #: **1805865567**Load #: **1811148**Manifest Number: **010923781JJK-5**Manifest Line: **35**Lot #: **27159341**Manifest Status: **PR**Manifest Page: **5**Shipment Type: **DRUM**Profile: **LCCRC**UN / NA: **UN3077**Final Code Date: **11/23/2018 8:45:47 AM**Pre Waste Class: **LCCRC**Testing Waste Class: **LCCRC**Processing Waste Class: **LCCRC**Date Received: **11/16/2018 9:09:12 AM**Restrictions: **N**Billing Waste Class: **LCCRC**Container Size: **5**Container Type: **DF**Processing Status: **YES**Original Quantity: **6**Current Quantity: **0**Quantity UOM: **LBS**Drum Weight: **6**Weight UOM: **LBS**Tare Weight: **2**

PCB Type:

Out of Service:

Serial #:

Generator Company: **PU14100**Generator Date: **11/15/2018**Generator EPA #: **CO8213820725**

Area:

Location: **KP**Initial Tracking Date: **11/16/2018 9:09:12 AM**Processing Type: **Shred Mixture**

Customer Batch #

Off-spec Reason:

Comments: **cm- lp**


MFG SKU:

Waste Numbers:

U055;U096

Modified by **RAYR5**on **11/25/2018 8:41:33 AM**Created: **11/19/2018 4:04:37 PM**



**WSRVWTRK - View Tracking Activities**
[Preparation](#) | [Composition](#) | [Form Viewing](#) | [Instructions](#) | [Lab Results](#) | [History](#) | [Gen Rptctes](#) | [Profile Rptctes](#)
Tracking Number:  

| Dr | Lor  | Activity | Qty        | Drum / Tank<br>Vehicle | Actual Date            | Manifest #<br>Area | Profile -- | Dspst Fclty | Entry Date             | User     |
|----|------|----------|------------|------------------------|------------------------|--------------------|------------|-------------|------------------------|----------|
| KP | INCN | 4        | TOU        |                        | 11/30/2018 12:53:00 AM |                    |            |             | 11/30/2018 05:57:40 PM | NELSONJI |
| KP | TTTT | 4        | H170B-E    |                        | 11/28/2018 07:40:00 PM |                    |            |             | 11/29/2018 01:01:45 PM | NELSONJI |
| KP | TTTT | 4        | H170B      |                        | 11/28/2018 03:28:17 PM |                    |            |             | 11/28/2018 03:30:16 PM | NELSONJI |
| KP | VHTK | 4        | H170A      |                        | 11/28/2018 06:19:47 AM |                    |            |             | 11/28/2018 06:19:49 AM | CYRC1    |
| KP | TKVH | 4        | MSUU410172 |                        | 11/27/2018 04:40:54 PM |                    |            |             | 11/27/2018 04:41:07 PM | MOENCHD1 |
| KP | VHTK | 4        | H150D      |                        | 11/25/2018 07:40:37 PM |                    |            |             | 11/25/2018 07:43:28 PM | DOBRINA2 |
| KP | SBLK | 4        | G-174      |                        | 11/25/2018 08:41:32 AM |                    |            |             | 11/25/2018 08:41:33 AM | RAYR5    |
| KP | INVT |          |            |                        | 11/23/2018 09:05:22 AM | KP Van 33          |            |             | 11/23/2018 09:05:22 AM | SAINTM1  |
| KP | INVT |          |            |                        | 11/22/2018 12:07:19 PM | 57A:Row 7N         |            |             | 11/22/2018 12:07:19 PM | CASTAGS1 |
| KP | INVT |          |            |                        | 11/21/2018 11:13:42 AM | 25 Inbound:Slot 1  |            |             | 11/21/2018 11:13:42 AM | FIEHTNJ1 |
| KP | PREC |          |            |                        | 11/16/2018 09:09:14 AM |                    |            |             | 11/21/2018 09:09:16 AM | FIEHTNJ1 |
| KP | RECV |          |            |                        | 11/15/2018 12:00:00 AM |                    |            |             | 11/19/2018 04:04:37 PM | FIEHTNJ1 |

**Attachment 7**  
**CHESI Waste Analysis Plan**

# **SECTION C-2**

# **WASTE ANALYSIS PLAN**

## **SECTION C-2**

### **Waste Analysis Plan**

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## ACRONYMS

|       |  |
|-------|--|
| ASTM  | American Society for Testing and Materials         |
| BTU   | British Thermal Unit                               |
| CFR   | Code of Federal Regulations                        |
| CHES  | Clean Harbors Environmental Services               |
| CHESI | Clean Harbors Environmental Services, Incorporated |
| CPG   | Central Profile Group                              |
| DCS   | Distributive Control System                        |
| GC/MS | Gas Chromatography Mass Spectrophotometry          |
| LDR   | Land Disposal Restrictions                         |
| LOD   | Limit of Detection                                 |
| LOQ   | Limit of Quantitation                              |
| MEP   | Multiple Extraction Procedure                      |
| NDEQ  | Nebraska Department of Environmental Quality       |
| PPE   | Personal Protective Equipment                      |
| PQL   | Practical Quantitation Limit                       |
| RCRA  | Resource Conservation and Recovery Act             |
| RL    | Reporting Limit                                    |
| SDS   | Safety Data Sheet                                  |
| TCLP  | Toxicity Characteristic Leaching Procedure         |
| TOU   | Thermal Oxidation Unit                             |
| TSD   | Treatment, Storage and Disposal Facility           |
| TSDF  | Treatment, Storage and Disposal Facility           |
| UHCs  | Underlying Hazardous Constituents                  |
| USEPA | United States Environmental Protection Agency      |
| WAP   | Waste Analysis Plan                                |
| WMPS  | Waste Material Profile Sheet                       |

## 1.0 INTRODUCTION

This section conforms to all requirements of the Nebraska Department of Environmental Quality (NDEQ) Title 128, Chapter 13, Section 012.02 and Chapter 21, and 40 CFR 270.14(b)(3).

This Waste Analysis Plan (WAP) has been developed to document the procedures which shall be used to identify the acceptability of waste materials as defined in Title 128, Chapter 2, Sections 004 through 007, that are intended for storage, recycling or treatment at the Clean Harbors Environmental Services, Incorporated (CHESI) facility and/or transfer offsite. This WAP is also used to determine whether treated waste streams meet appropriate limitations (e.g., delisting parameters, Land Disposal Restrictions (LDR) requirements, etc.) prior to further management. Specifically, the WAP includes:

- Prequalification procedures conducted prior to any shipment of waste to CHESI to determine the acceptability of the waste stream pursuant to facility permit conditions and operating capabilities;
- Receiving procedures conducted upon arrival of incoming loads to verify that the delivered waste matches the accompanying manifest, prequalification documentation, and the conditions of the facility permit; and
- Pre-processing and post-processing analytical procedures to maintain safe and appropriate methods of storage, treatment, or other handling of waste within the facility, or for outbound waste/treatment residuals.

Specific WAP requirements and procedures, as it pertains to waste pre-qualification and receipt, are grouped into one of six general waste categories based on the particular storage, or handling operation(s) that a waste stream is subjected to while at CHESI. The general waste categories include:

- Non-bulk Containerized Wastes - Wastes in this category arrive in non-bulk containers in either solid, sludge or liquid form. Non-bulk containerized wastes are either decanted, consolidated, processed through the wet or dry solids feed system, or transferred offsite to a designated facility.
- Bulk Containerized Solid Wastes - Wastes in this category arrive in bulk containers as solids or sludge. These wastes are processed through the wet or dry solids feed system.
- Bulk Containerized Liquid Wastes - Wastes in this category typically arrive in tanker shipments and are processed through the leanwater, energetic, direct feed system or wet solids feed system.



- Direct Feed Liquid Wastes – Wastes in this category typically arrive in tanker shipments and are processed through the direct feed system.
- Lab Pack Wastes - Lab Packs are waste streams that are comprised of identifiable, used or unused commercial chemical products, which are not mixed with other characteristic or listed hazardous wastes prior to or during shipment. Lab packs include a primary and a secondary container. The primary container (e.g., vials, jars, bottles) contains the waste. The secondary container may contain several primary containers and serves as containment should any material be released from the primary container. A packing slip accompanies each secondary container, identifying the contents of each primary container. Wastes in this category typically arrive as non-bulk containers and are either shredded and processed through the dry solids feed system or transferred offsite to a designated facility.
- Debris – Debris is defined in 40 CFR 268.2(g). Wastes in this category arrive in non-bulk or bulk containers and are processed through Area 55, dry solids feed system or transferred offsite to a designated facility.
- Bulbs – Wastes in this category are generally fluorescent tubes, or CFL's and are packed in boxes. They are shipped offsite for processing. .

## **2.0 WASTE PREQUALIFICATION PROCEDURES [40 CFR 264.13]**

CHESI has developed a waste prequalification system to determine the acceptability of candidate waste streams prior to the waste being shipped to the facility.

The following procedure is required for each new candidate waste stream intended for storage and/or treatment at CHESI, excluding materials referenced in Section 4.0:

- The generator must complete and submit to CHES a Waste Material Profile Sheet (WMPS) form (as shown in Appendix C2-1), or equivalent form, along with any supporting documentation such as SDS, product literature, analyses, etc. The Profile Sheet can be either in a hard copy paper form or electronic format.
- A pre-acceptance sample will not be requested unless the waste acceptance staff requires additional data to complete the evaluation of the waste.
- The first shipment of the waste stream into the facility, excluding materials referenced in Section 4.0, will be sampled at a minimum for conformance testing (example, finger print or Great Eight Analysis), as referenced in Appendix C2-2. Additional analysis may be warranted if the CHESI technical staff requires additional data to complete the evaluation.

- The representative sample, if applicable, may be analyzed for one or more parameters listed in Table C2-1.
- Candidate waste streams carrying USEPA hazardous waste codes must be cross-referenced with CHESI's Part A application for acceptability. Table C2-2 delineates those hazardous waste codes that are unacceptable at CHESI.

**Table C2-1 Potential Waste Characterization Parameters for Storage and/or Incineration**

| <b>Parameters</b>        | <b>Rationale for Parameters</b>  |
|--------------------------|--|
| Ash Content              | Incineration and Waste Handling  |
| Viscosity                | Waste Handling   |
| Density                  | Waste Handling   |
| Corrosivity              | Waste Handling and Storage   |
| Total Halogens           | Incineration and Waste Handling  |
| Reactive Screens         | Waste Handling and Storage   |
| Metals Screen            | Identification of Metals for Incineration (not adequate for determining RCRA Status) or Waste Handling |
| Heat of Combustion (BTU) | Incineration and Waste Handling  |
| Radiation                | Waste Handling   |

**Table C2-2 Unacceptable USEPA Hazardous Waste Codes**

| <b>F Codes</b>                           | <b>K Codes</b>  | <b>P Codes</b> | <b>U Codes</b>                                   |
|--|---|----------------|--|
| F020, F021, F022, F023, F026, F027, F028 | K062*, K064, K065, K066, K090, K091, K174, K175, K176, K177, K178 | P065, P081     | U033, U096, U160, U189, U195, U205, U214*, U215* |

\* Waste designated with an asterisk will not be accepted if listed alone.

## **2.1 Waste Stream Acceptance Criteria**

The CHES technical staff (Central Profile Group and/or Plant personnel) is responsible for reviewing prequalification information and determining whether or not to approve the waste stream. The evaluation is based on a review and comparison of the following information to Kimball's operating permits:

- Proper and accurate completion of the WMPS form,
- Supporting documentation provided by the generator including, but not limited to, manufacturer's information and SDS.
- Physical characteristics provided by generator either from generator knowledge and/or analytical data from testing conducted by CHESI or another reputable laboratory on a representative sample(s).

## **2.2 Notice of Proper Facility Permits [40 CFR 264.12(b)]**

Upon determination that a waste stream is approved for management at the facility, CHESI shall provide to the generator a written notice, which states that the facility has been issued all necessary licenses and permits to properly accept, store and/or treat the waste stream(s) under consideration. Documentation of this notice is maintained by CHESI and is available for review at the facility.

## **2.3 Frequency of Prequalification Procedures [40 CFR 264.13(b)(4)]**

Prequalification procedures shall be followed prior to or upon receipt of the initial shipment of a candidate waste stream to the facility.

The WMPS shall be reviewed and recertified by the Central Profile Group (CPG) with the generator or the generator's authorized representative on an annual basis.

The prequalification procedures shall be repeated when:

- 1) The generator notifies CHESI that the process generating the waste has changed; or
- 2) If CHESI has reason to suspect that the hazardous waste received at the facility is not as described in the prequalification documentation or manifest accompanying the shipment.

In the event of an offsite emergency response action, the prequalification procedures may be conducted on a waste at the time of arrival at the CHESI facility.

## **2.4 Lab Packs**

Lab pack prequalification is conducted at the site of generation by qualified Clean Harbors personnel or other approved hazardous waste contractors.

During the waste identification and lab packing process, Clean Harbors personnel or other approved hazardous waste contractors compare the USEPA hazardous waste codes of the chemicals proposed for handling with the list of waste codes on the facility's approved RCRA Part A application. Any waste code that does not appear on the RCRA Part A application is not authorized for acceptance and storage at the facility.

## **3.0 WASTE RECEIVING PROCEDURES**

### **3.1 Non-Bulk Container Receiving Procedures**

This section applies to waste in non-bulk containers with the exception of lab packs as referenced in Section 3.3 and the materials referenced in Section 4.0. Waste receiving procedures are depicted in Figure C2-1.

Upon arrival of each non-bulk shipment, CHESI shall review the waste identification information (e.g., USEPA waste codes, written description) on the accompanying manifest, LDR documentation and the CHESI generated receiving documents.

Within 10 days of the CHESI receiving process being completed, each non-bulk container shipment shall be counted, inspected and sampled in accordance with section 2.0 (Waste Prequalification Procedures) of this document.

Each non-bulk waste stream will be handled as a batch of containers. A batch of containers is defined as a single waste stream received from a generator. CHESI shall sample four randomly selected containers or the square root of the number of containers in each batch, whichever is larger (fractional numbers are rounded up). All containers will be visually inspected prior to processing.

All containers to be sampled shall be opened and visually inspected. Sampling will be based on methods delineated in Table C2-3. The samples of the same batch may then be

composited into one sample and analyzed for parameters delineated in Table C2-4 and/or Appendix C2-2.

Conformance testing (Appendix C2-2) shall be conducted based on the disposition of the waste (as described in Section 4.0 below). The analytical results of the conformance testing (Appendix C2-2) shall be compared to the prequalification information listed on the Waste Receiving Report and in certain circumstances to the corresponding CHES profiles to verify the identity of the material. If the conformance data verifies the prequalification information, the waste shall be deemed acceptable. In the event a waste material is deemed unacceptable, CHESI shall follow the procedures set forth in Section 5.0.

### **3.2 Bulk Container Receiving Procedures**

Upon arrival of each bulk shipment (e.g., roll off, intermodal, tank truck), CHESI shall review the waste identification information (e.g., USEPA waste codes, written description) on the accompanying manifest, LDR documentation and the CHESI generated receiving documents. Within 10 days of arrival at the facility, bulk shipments shall be inspected and sampled, if applicable. Sampling will be accomplished based on methods delineated in Table C2-3.

All bulk shipments, with the exception of direct feed shipments, shall be inspected for color, physical state, (e.g., solid, semisolid, liquid), and layering.

A sample of direct feed or odorous shipments may be taken as described for normal tanker shipments, may be taken through a closed system valve attachment in the sampling bay or may be taken after the tanker has been connected to the direct feed offload system, depending on waste characteristics. If the sample is taken at the offload location, the sample is taken through a closed system downstream of the tanker to reduce personnel exposure. Because of the exposure concerns that may be associated with the direct feed or odorous material, personnel may not be able to perform visual inspections of the container contents. In this case, the sample rather than the receiving container will be visually inspected for color, physical state, and layering.

The conformance testing to be conducted shall be based on the disposition of the waste as discussed in Section 4.0 below. The conformance data (Appendix C2-2) shall be compared to the prequalification information to verify the identity of the material. If the conformance data verifies the prequalification data, the wastes shall be deemed acceptable. In the event a waste material is deemed unacceptable (e.g., does not match the profile), CHESI shall follow the procedures specified in Section 5.0.

### **3.3 Lab Packs**

Within 10 days of the CHESI receiving process being completed, each load of lab packed waste will be counted and inspected for proper labeling and marking to include the waste identification information (e.g., USEPA waste codes, written description) on the accompanying manifest, LDR documentation and the CHESI generated receiving documents. Before processing, all lab pack packing slips (inventory) shall be inspected to verify appropriate handling.

A packing slip for each container must accompany the hazardous waste manifest (or bill of lading if the material involved is non-hazardous). In addition, each lab pack must have a copy of the packing slip attached to the outside of the shipping container.

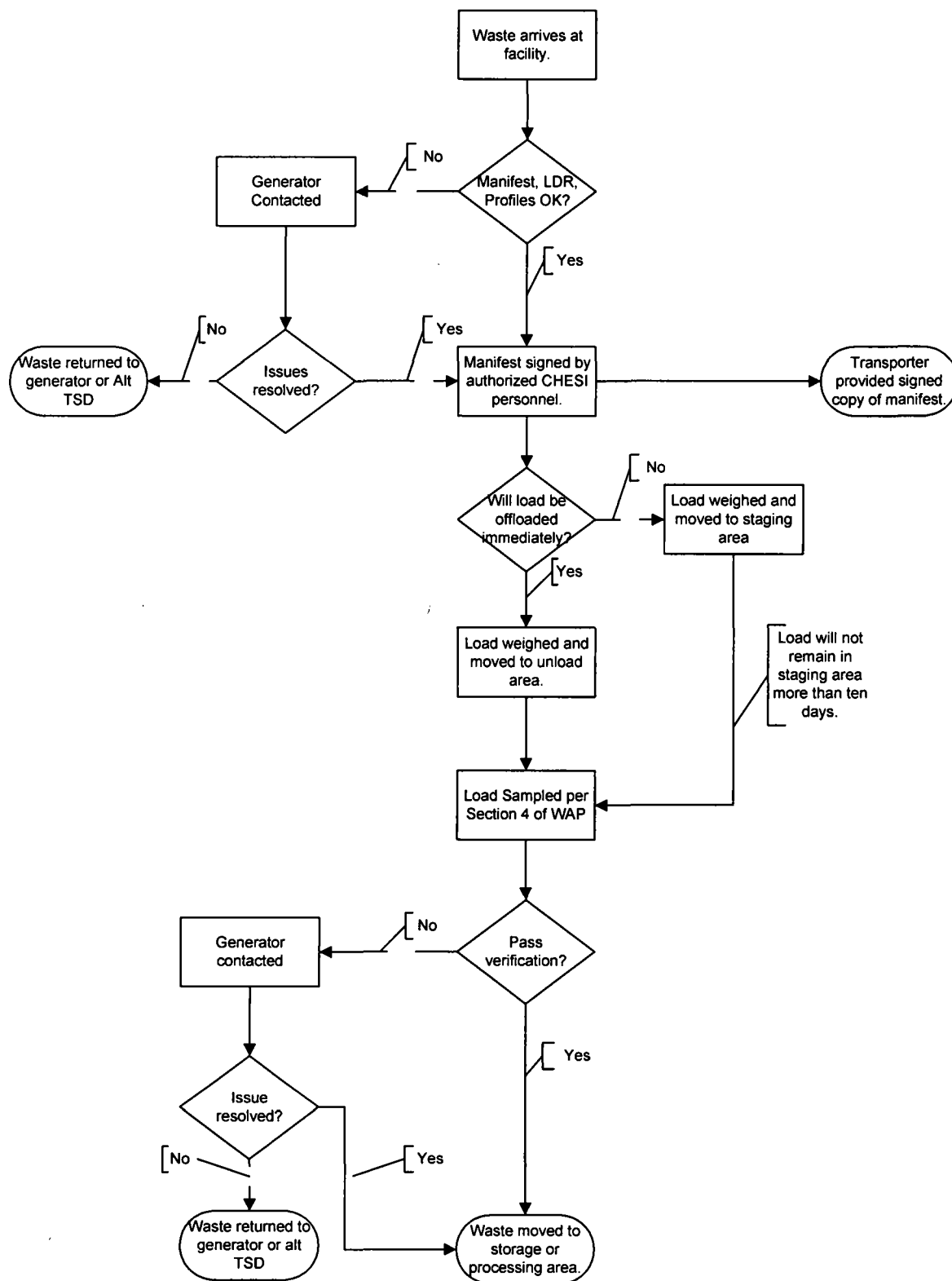


Figure C2-1 Waste Acceptance Procedures

#### **4.0 CONFORMANCE TESTING [40 CFR 263.13]**

All incoming waste streams intended for storage, handling, recycling, and treatment at the CHESI facility, with the exception of the following, shall be sampled and conformance tested (Appendix C2-2). Rationales for the exceptions and their examples are listed below:

1. Sampling of these materials can present extraordinary health, safety or environmental hazards. Examples are:
  - Extremely toxic material as defined by USEPA as acute hazardous (40 CFR 261.30)
  - Reactive material as defined by USEPA as D003 (40 CFR 261.23)
  - At the discretion of management, materials that will not be treated at this facility (e.g. acids, water reactives, cyanide and sulfide bearing wastes)
2. A representative sample of the material can not be obtained. Due to the physical nature of the material, the analyses will not provide meaningful data. Examples are:
  - Lab packs
  - Lab wastes
  - Filter cartridges
  - Used containers which are "RCRA" empty
  - Equipment removed from service (e.g. fluorescent tubes, batteries)
  - Cylinders
  - Aerosols
  - Household wastes
  - Contaminated debris
  - Mixed pharmaceuticals
  - Mixed non-infectious medical wastes
  - Mixed herbicides and pesticides
3. The compositions of the wastes are known and analyses are not necessary. Examples are:
  - Commercial products or chemicals which are off-specification, outdated, contaminated or banned
  - Residue and debris from cleanup of a spill of a single chemical or commercial product
  - At the discretion of management, wastes received from other CHESI facilities that previously had conformance testing performed
  - Conformance test for extremely odorous materials may be subject to different analytical and acceptance procedures approved by NDEQ in a case-by-case basis.



- Waste bulbs destined for recycling or shipment off-site.

For these exceptions, the generator will supply sufficient chemical and physical information of the wastes, as referenced in 2.0, in order to determine how the wastes should be managed.

#### **4.1 Conformance Testing Parameters**

Conformance testing consists of the parameters listed Appendix C2-2, Conformance Testing Parameters.

#### **4.2 Frequency of Conformance Testing**

##### **4.2.1 Non-Bulk Container Shipments**

Each incoming non-bulk container shipment, with the exceptions of wastes delineated in Section 4.0, shall be sampled and analyzed for the conformance testing parameters as described above. Samples from non-bulk containers of the same profiled waste stream may be composited prior to analysis as discussed in Section 3.1. Non-bulk containers will be sampled utilizing sampling methods discussed in Section 9.1.

##### **4.2.2 Bulk/Gondola Container Shipments**

Each incoming bulk load shall be sampled, if applicable, and analyzed for the conformance testing parameters as described above. Bulk containers will be sampled utilizing sampling methods discussed in Section 9.1.

##### **4.2.3 Rail Car Shipments**

Rail car shipments consist of multiple container shipments of a single waste stream/single profile. This waste stream has been consolidated in the rail car by the generator. The waste is then shipped to a rail siding and offloaded into several containers for shipment to the CHESI facility. CHESI shall sample four randomly selected containers or the square root of the number of containers in

each railcar shipment, whichever is larger (fractional numbers are rounded up).  
All containers will be visually inspected prior to processing.

The bulk container will be sampled utilizing sampling methods discussed in Section 9.1.

## **5.0 GENERAL WASTE ACCEPTANCE CRITERIA**

In deciding whether or not to accept an incoming waste shipment, the CHESI technical staff shall consider the following criteria, as appropriate:

- Prequalification documentation information;
- Physical characteristics of the container and its contents as received through visual observation;
- Waste acceptance sampling and analytical conformance, if applicable;
- Piece counts, waste description, container labeling, and USEPA waste codes per accompanying hazardous waste manifest. The unacceptable waste codes are found in Table C2-2.
- Accuracy and completeness of land disposal restriction documentation; and
- The professional experience and judgment of the CHESI technical staff.

CHESI technical staff which may consist of, but not limited to, Receiving Technicians, Chemists or Management, confirms that the waste that arrives at the facility is substantially similar in physical character and chemical composition to the waste stream that was approved during the waste prequalification procedures, and is suitable for storage, handling, and/or incineration. Management will make the decision for rejection based on information provided by the CHESI technical staff.

### **5.1 Non-Conformance and Rejection [40 CFR 264.72(a)]**

Following review of the shipping documentation accompanying the waste and general waste acceptance criteria, there may be three types of manifest discrepancies that can occur as outlined below. Upon discovering a significant manifest discrepancy, CHESI will attempt to resolve the discrepancy by contacting the generator or the generator's authorized representative. If the discrepancy is not resolved within 15 days, CHESI will

submit to the NDEQ a letter describing the discrepancy and attempts to reconcile it, and a copy of the manifest or shipping paper.

It is important to note that not all manifest discrepancies are significant and not all non-conformance issues may be resolved. Federal and State regulations require the generator to properly classify their wastes. CHESI will not force or coerce a generator into any manifest changes that they feel are inappropriate. In the event that a resolution cannot be reached, CHESI has three options : (1) reject the load back to the generator; (2) send the load to an alternate facility as directed by the generator; or (3) accept the load and manage it based on the careful review of the waste analysis results and the generator's approval, in accordance with the approved Part B permit application.

### **5.1.1 Quantity or Type Manifest Discrepancy**

#### **5.1.1.1 Quantity Discrepancy**

To check for quantity manifest discrepancies, the number of containers or the weight of the bulk shipment is reconciled with the manifest. The number of containers shall be correct. The actual weight of bulk shipments must be within  $\pm 10\%$  of the weight noted on the manifest. If either of these conditions is exceeded, the manifest is considered discrepant and actions shall be taken to reconcile the discrepancy. CHESI will attempt to resolve the manifest discrepancy by contacting the generator or the generator's authorized representative. Any authorized changes will be noted on the manifest, which becomes part of the operating record.

#### **5.1.1.2 Type Discrepancy**

Type discrepancies are determined by comparing the analyses or documentation, where applicable, of incoming load samples to the prequalification documentation. This review will verify that each shipment matches the waste as profiled. If the shipment is considered non-conforming, one or more of the following actions shall occur to resolve the discrepancy:

- Additional analyses performed
- The generator or the generator's authorized representative is contacted communicating the discrepancy in order to resolve

Depending on the nature of the corrections, this generally results in correction of the manifest, amendments to the profile and/or the creation of a new profile. Corrections on the manifest will be made by CHESI personnel with the generator's approval. A manifest correction will become part of the operating record. Amendments to the profile will require written approval from the generator describing the changes in waste stream and proper waste characteristics.

- Lab packs shall be considered non-conforming when knowledge, physical appearance or other analytical data identifies the presence of unanticipated contaminants or characteristics.

#### **5.1.2 Rejected Wastes Manifest Discrepancy**

Rejected wastes, which may be a full or a partial shipment of the hazardous waste, are those which CHESI cannot accept. An example of an unacceptable waste is one that carries an USEPA hazardous waste code that is not on the list of authorized waste codes and will be rejected back to the generator or an alternate TSDF at the direction of the generator. A list of unacceptable USEPA hazardous waste codes is provided in Table C2-2. Rejected loads will be sent to an alternate TSDF or returned to the generator within 60 days.

#### **5.1.3 Non-RCRA "Empty" Container Manifest Discrepancy**

Container residues that exceed the quantity limits for "empty" containers set forth in 40 CFR 261.7(b) constitutes a container residue discrepancy. If a container residue discrepancy is discovered, the generator or authorized representative is contacted communicating the discrepancy in attempt to resolve. Resolution generally entails utilizing a different profile.

## **6.0 ADDITIONAL REQUIREMENTS FOR INCOMPATIBLE WASTES [40 CFR 264.17 and 270.14(b)(9)]**

CHESI prequalification and waste acceptance procedures have been developed to identify the key chemical and physical characteristics of a waste stream. A critical part of these evaluations is to assess chemical compatibility of material so that CHESI can safely store, treat, and/or consolidate the stream under consideration with other accepted wastes.

CHESI segregates wastes in storage according to the chemical characteristics of the wastes being stored. CHESI shall conduct compatibility assessments prior to placing a container into a storage unit and prior to any mixing or commingling operation involving two or more different waste streams. Compatibility testing procedures are discussed below.

### **6.1 Storage and Transfer of Wastes**

All wastes shall be compatible with their container. Waste containers placed into storage will be maintained in accordance with the Compatibility Chart, Table D1-3, found in Section D-1, Containers.

Prior to undertaking any liquid waste mixing or commingling activities from bulk containers or between tanks, CHESI shall utilize compatibility test procedures based on ASTM D5058, and its updates, to evaluate compatibility. ASTM D5058 is used as a tool to safely commingle and process waste. Personnel conducting the compatibility test will wear appropriate personal protective equipment (PPE). This test combines small quantities of the materials to be consolidated and observations for any signs of a reaction (e.g., heat, flame or smoke, off-gassing, polymerization, etc.). If no reaction occurs, the materials will be deemed compatible and suitable for consolidation at the existing ratio. If a reaction occurs, technical personnel are notified and additional testing occurs prior to mixing or commingling the waste streams.

### **6.2 Lab Packs**

Lab packs received at CHESI are either handled onsite or shipped to alternate offsite treatment and disposal facilities. There are four basic handling operations that may be performed at CHESI in order to facilitate lab pack treatment and disposal options.

- Consolidation - A “closed-container” activity that does not involve any mixing of waste streams and refers to the repacking of individual primary containers (bottles, jars, etc.) of chemically compatible wastes into a secondary container. Compatibility is determined through the knowledge of the chemicals (e.g., label information, SDS, profile data), the use of standard chemical compatibility charts/references, and/or the results of the treatment of similar wastes by similar processes under similar operating conditions.
- Repackaging - An “open-container” operation in which the contents of a single primary container of a hazardous waste are placed into another container/containers of the same size (e.g., from a glass bottle into a polyethylene bottle) or divided into smaller quantities (e.g., 1-gallon container of liquid split into four 1-quart containers). Repackaging does not involve the mixing of waste streams and only clean/unused containers are used as the receiving container.
- Pouring Off - An automated “open-container” operation in which chemically compatible wastes from small individual primary containers (e.g., vials, jars, bottles, etc.) are poured/mixed into onsite tanks or a common container such as a 55-gallon drum. Compatibility is determined through the knowledge of the chemicals (e.g., label information, SDS’s, profile data), the use of standard chemical compatibility charts/references, and/or the results of the treatment of similar wastes by similar processes under similar operating conditions.
- Bulking - An “open-container” operation in which chemically compatible solids in drums, bags, or other primary containers are aggregated into a common tank or container (e.g., roll off container). Compatibility is determined through the knowledge of the chemicals (e.g., label information, SDS’s, profile data), the use of standard chemical compatibility charts/references, and/or the results of the treatment of similar wastes by similar processes under similar operating conditions.

## 7.0 PROCESS ANALYSIS

Prior to incineration, each separate waste feed stream is analyzed for the following feed control parameters:

- Ash Content
- Total Halogen Content
- Total Sulfur Content
- Metallic Constituent Analysis (Sb, As, Ba, Be, Cd, Cr, Pb, Hg, Ni, Se, Ag, Tl)

- BTU content

This data is used to monitor the parameters that limit the feedrate to the Thermal Oxidation Unit (TOU). Specific WAP requirements and procedures, as it pertains to process analysis, are grouped into one of six (6) areas or processes: (1) Area 70 tank farm; (2) waste processing; (3) Area 58 Tank Farm (4) dry solids feed; (5) wet solids feed; (6) direct feed.

## **7.1 Area 70 Tank Farm**

### **7.1.1 Liquid Non-Bulk Containers**

Liquid wastes in non-bulk containers may be decanted and processed through a liquid holding tank or into another approved container, e.g. vacuum truck. Liquid wastes are then transferred to one or more liquid storage tanks. Prior to transfer, a compatibility test will be conducted. If there is any evidence of a reaction, the materials will be deemed unsuitable for consolidating at the existing ratio. Decanted liquid containers will be analyzed per the blend plan in accordance with Section 7.1.2.

### **7.1.2 Liquid Bulk Containers**

Liquid waste is transferred to Area 70 storage tanks from bulk liquid containers and/or from a liquid holding tank used for consolidation of non-bulk liquid containers. Compatibility testing, to include tank residues, is done prior to the introduction of a new waste into a tank. Liquid waste may be sampled from either the liquid storage tank or the liquid feed tank. In either case, the tank contents are agitated for a minimum of 60 minutes prior to sampling and the samples are collected from sampling ports.

If a liquid storage tank is sampled and analyzed, a weighted average blend is determined based on the previous feed tanks analyzed, and the weight and analysis of the material transferred from each storage tank (see Figure C2-2). If unanalyzed waste is added to a storage tank after sampling and analyses are complete, the storage tank will be re-sampled and re-analyzed. If material is

added with known concentrations of feed control parameters, the new feed control parameters are calculated on a weighted average.

As an alternative to sampling a storage tank, a feed tank may be sampled. This sample is then analyzed for the feed control parameters. If unanalyzed waste is added to a feed tank after sampling and analyses are complete, the feed tank will be re-sampled and re-analyzed before the contents can be scheduled for further processing. If material is added with known concentrations of feed control parameters, the new feed control parameters are calculated on a weighted average.

## **7.2 Waste Processing**

The following sections describe shredding, Area 58 Tank Farm and waste processing.

### **7.2.1 Shredding Process (Area 55)**

Items selected for the shredding process are identified by CHESI technical staff through waste knowledge or the use of a "pick list". The "pick list" delineates those containers that can be mixed in the shredding process. The compatibility criteria for a mixing process may be based on a thorough profile review, through the knowledge of the chemicals (e.g., label information, SDS's), the use of standard chemical compatibility charts/references, or the results of the treatment of similar wastes by similar processes under similar operating conditions. Shredded material is produced through processing waste from non-bulk and/or bulk containers. Containers are shredded in a dual stack shredder system (G-174 and G-175) and the resulting liquid and solids are separated in a screw conveyor (K-151). The liquid then goes through the helisieve (K-145) and is transferred to Area 58 Tank Farm. Residual solids that go through the helisieve are separated by separator screw K-143. The metal maybe separated from the solids in the magnetic separator (K-172) and cleaned through adding solvent to the hydropulper (SP-160). The solid waste material goes through a final shredder (G-159) and through magnetic separator K-170. The solid shredded material that the metal has been separated from is transferred to a bulk container for incineration or transfer to a designated facility. The liquid from the shredded material will be



pumped to Area 58 Tank Farm. Liquid and solids may also be blended together in the hydropulper (SP-160) and pumped to the Area 58 Tank Farm. The resulting bulk container will be sampled as described in Section 9.1. The sample may be directly analyzed for the blend parameters or may be consolidated on a weighted-average with other samples of wastes within the same incineration batch. The consolidated sample will then be analyzed for the feed control.

In Area 55 waste may also be dumped into a receiving hopper (H-150A or H-150B) and transferred into portable bulk containers and is not mixed with other waste streams in the process, feed control analysis may be determined as described in section 7.3

If waste is emptied into a receiving hopper and commingled with other waste streams or additive (e.g., absorbent material), waste will be mixed prior to transfer into portable bulk containers. The wastes chosen for comingling are determined by CHESI technical staff by reviewing a “pick list.” The compatibility criteria for a comingling process may be based on a thorough profile review, through the knowledge of the chemicals (e.g., label information, SDSs), the use of standard chemical compatibility charts/references, or the results of the treatment of similar wastes by similar processes under similar operating conditions. The portable bulk containers are then be sampled, as described in Section 9.1, for the blend parameters. Each container generated from that batch will then be assigned the resulting blend analysis for further processing through the dry solids feed system.

### **7.2.2 Area 50F Shredding Process**

Items selected for the shredding process are identified by CHESI technical staff through waste knowledge or the use of a “pick list”. The “pick list” delineates those containers that can be mixed in the shredding process. The compatibility criteria for a mixing process may be based on a thorough profile review, through the knowledge of the chemicals (e.g., label information, SDS’s), the use of standard chemical compatibility charts/references, or the results of the treatment of similar wastes by similar processes under similar operating conditions. Shredded material is produced through processing waste from non-bulk and/or bulk containers. Containers are shredded in shear shredder G-159 and the resulting liquid and solids are separated by separator screws (K-343A). The solids

are transferred to a portable container and either processed through the dry solids feed system or sent to a designated facility. If the resulting portable container will be processed through the dry solids feed system it will be sampled as described in Section 9.1. The sample may be directly analyzed for the blend parameters or may be consolidated on a weighted-average with other samples of wastes within the same incineration batch. The consolidated sample will then be analyzed for the feed control.

Before liquid is transferred to the Area 50F Hoppers (H-342A-D), compatibility of the incoming liquid in the storage hopper is confirmed. If the liquid being transferred and the empty tank are deemed incompatible, then the liquid will not be transferred to the designated tank until the tank is flushed with potable water.

### **7.2.3 Area 58 Tank Farm**

Liquid waste from the shredding process building is transferred to the Area 58 Tank Farm. CHESI uses the “pick list” approach described in section 7.2.1 to determine compatibility. The criteria for this mixing process is based on a thorough profile review and the compatibility chart found in Section D-1 Container Report to ensure no incompatible materials are mixed. If liquid is transferred to the Area 58 Tank Farm from bulk liquid containers then compatibility testing of that container and the existing liquid in the storage tank is done. In this case the tank contents are agitated for a minimum of 60 minutes prior to sampling and the samples are collected from sampling ports. If there is any evidence of a reaction, the materials will be deemed unsuitable for consolidating at the existing ratio. Before liquid is transferred to the Area 58 Tank Farm to a designated empty tank, compatibility of the incoming liquid in the storage tank is confirmed. If the liquid being transferred and the empty tank are deemed incompatible, then the liquid will not be transferred to the designated tank until the tank is flushed with potable water.

### **7.2.4 Waste Processing (Area 50)**

Wastes processed in the Waste Processing Building are from two general sources: (1) wastes arriving in containers requiring immediate transfer (e.g., end dump containers), or (2) wastes requiring preparation prior to being fed.

If waste is emptied into a receiving hopper and transferred into portable bulk containers and is not mixed with other waste streams in the process, feed control analysis may be determined as described in section 7.3

If waste is emptied into a receiving hopper and commingled with other waste streams or additive (e.g., absorbent material), waste will be mixed prior to transfer into portable bulk containers. The wastes chosen for comingling are determined by CHESI technical staff by reviewing a “pick list.” The compatibility criteria for a comingling process may be based on a thorough profile review, through the knowledge of the chemicals (e.g., label information, SDSs), the use of standard chemical compatibility charts/references, or the results of the treatment of similar wastes by similar processes under similar operating conditions. The portable bulk containers are then be sampled, as described in Section 9.1, for the blend parameters. Each container generated from that batch will then be assigned the resulting blend analysis for further processing through the dry solids feed system.

Non-bulk containers may be consolidated directly into a bulk portable container. In this case, feed control analysis is performed as described in Section 7.3.

### **7.3 Dry Solids Feed (Area 50)**

Wastes may either be processed directly through the dry solids feed system or may be consolidated into containers prior to being processed through the dry solids feed system.

Prior to processing wastes through the dry solids feed system, the wastes are analyzed for the feed control parameters. This may be accomplished by one of three procedures: (1) conformance testing (Appendix C2-2) samples for each batch of containers or from individual bulk containers may be analyzed for the additional feed control parameters; (2) the laboratory may consolidate conformance samples (Appendix C2-2) of batches of drums or containers that will be processed in a dry solids feed batch and analyze the consolidated sample for the additional feed parameters; or 3) the blend sample taken after

a consolidation process described in Section 7.2. These analyses will be used to develop the average concentrations for the solid feeds to the incinerator based on the weighted average of the wastes mixed together from a waste feed batch.

Material may be offloaded into either H-170A or H-170B, adequately mixed and fed directly to the charging hopper (H-386) and directed to the TOU. A blend (Figure C2-2) is established for H-170A or H-170B, as applicable, using a weighted average calculation.

#### **7.4 Wet Solids Feed System (Area 50)**

Wastes may either be processed directly through the wet solids feed system or may be consolidated into containers prior to being processed through the wet solids feed system.

Prior to processing through the wet solids feed system, the wastes are analyzed for the feed control parameters. This may be accomplished by one of three procedures: (1) conformance testing (Appendix C2-2) samples for each batch of containers or from individual bulk containers may be analyzed for the additional feed parameters, (2) the laboratory may consolidate conformance samples (Appendix C2-2) of batches of drums or containers that will be processed in a wet solids feed batch and analyze the consolidated sample for the additional feed parameters, or 3) the blend sample taken after a consolidation process described in Sections 7.1 and 7.2. These analyses will be used to develop the average concentrations for the feed to the incinerator based on the weighted average of the wastes mixed together from a waste feed batch.

Material may be offloaded into H-180 and transferred into the portable container and directed to the TOU. A blend, see Figure C2-2, is established for the wet solids feed system using a weighted average calculation.

As an alternative, the portable container may be sampled and analyzed for the feed control parameters.

#### **7.5 Direct Feed System (Area 70)**

Direct feed wastes are fed to the incinerator from the receiving container. Because the wastes will not be commingled with any other wastes prior to incineration, the sample taken for conformance analysis (Appendix C2-2) will also be analyzed for the feed control parameters.

Prior to feeding the flush media from the direct feed flush tank, a sample may be taken from the tank and analyzed for the feed control parameters. As an alternative to sampling the waste flush media, the feed control parameters for the previously fed waste stream and the flush media may be compared. The maximum value for each feed control parameter, as determined from the comparison of both the waste stream and the flush media, will then be utilized.

## **7.6 Preparation of Waste Blends**

The CHESI technical staff directs disposal of materials, both liquids and solids, within the facility. They also set up batches, which contain composition data of materials that are fed to the TOU from feed tanks and feed hoppers. The composition data of batches are established using the composition data of waste materials, which are transferred from storage tanks and receiving hoppers into feed tanks and feed hoppers, respectively.

Blends and associated batches are based on the actual and projected availability of feed materials in inventory. Batch information includes blending guidance for storage tanks, receiving hoppers, and direct feed material, the batch identification number and the applicable composition data (feed control parameters).

Composition data of batches is based on actual analytical data from the laboratory.

The use of weighted average blends to establish composition data for monitoring purposes develops data that can be used to control operation of the TOU. All analytical results are entered into the distributive control system (DCS) prior to transferring material into the TOU.

Once batches have been established, material may not be added to the feed tanks or feed hoppers without updating the batch to ensure the correct analytical data are used. As an alternative, if material is added after a batch has been determined, a comparison can be

made of the batch analytical data and the analytical data for the added material. The maximum concentration for each parameter representing the new batch may then be entered into the DCS.

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Figure C2-2, Burn Plan

| Burn Plan              |      |             |           |             |                  |         |            |         |            |                  |         |                       |                 |
|------------------------|------|-------------|-----------|-------------|------------------|---------|------------|---------|------------|------------------|---------|-----------------------|-----------------|
| Plan ID: B090204-a     |      |             |           |             |                  |         |            |         |            | Wed 2/4/09 09:07 |         |                       |                 |
| Feed System            |      | Non-Viscous |           |             | Viscous          |         | Dry Solids |         | Wet Solids |                  |         |                       |                 |
| Feed Vessel            |      | T320        | T322      | Direct Feed | T360             | T361    | H170A      | H170B   | H170BE     | RR813            | RR813   |                       |                 |
| Current Batch ID       |      | 3090013     | 3090014   |             | 4090016          | 4090017 |            | 1090018 | 1090018    | 2090007          | 2090008 |                       |                 |
| Lab ID                 |      | b09010506   | b09020002 |             | calc'd           | calc'd  |            | calc'd  | calc'd     | 109010452        | calc'd  | Constraints (lb/hr)   | Total Feed Rate |
| Alert Rate, lb/hr      |      |             |           |             |                  |         |            |         |            |                  |         | Temp Oper Feed Limits | % of Limit      |
| Initial Rate, lb/hr    |      |             | 2000      |             |                  | 4000    |            | 9000    |            |                  | 1000    | Total Feed Rate       | 16,000          |
| Bulk Density           |      |             |           |             |                  |         |            |         |            |                  |         |                       | 17,500          |
| Product Ash, Wt %      |      |             |           |             |                  |         |            |         |            |                  |         |                       | 91.43%          |
| Total Ash, Wt %        |      | 1.00        | 1.00      |             | 1.00             | 1.00    |            | 12.99   | 12.72      | 1.98             | 1.00    | Product Ash           | 1,169           |
| Heating Value, Btu/lb  |      | 13,000      | 9,200     |             | 1,100            | 410     |            | 63.00   | 57.18      |                  |         | Total Ash             | 5,740           |
| Density (g/mL)         |      | 0.86        | 1.00      |             | 1.01             | 1.00    |            | 2,823   | 4,099      | 3,578            | 410     | MM Btu/hr             | 45.9            |
| Chloride, ppm          | Cl   | 22,000      | 120,000   |             | 8,300            | 8,590   |            | 8,235   | 2,816      | 1,789            | 2,600   | Chloride              | 351             |
| Fluoride, ppm          | F    | 130         | 180       |             | 180              | 186     |            | 1,414   | 34         | 232              | 180     | Fluoride              | 14              |
| Bromide, ppm           | Br   | 3,100       | 910       |             | 920              | 952     |            | 1,053   | 1,644      | 1,800            | 1,300   | Bromide               | 16              |
| Sulfate, ppm           | S    | 1,100       | 1,500     |             | 1,500            | 1,560   |            | 7,527   | 3,112      | 1,489            | 1,500   | Sulfur                | 78.5            |
| Antimony, ppm          | Sb   | 0.20        | 0.20      |             | 0.20             | 0.20    |            | 48.91   | 19.26      | 0.20             | 0.20    | Antimony              | 0.4416          |
| Arsenic, ppm           | As   | 0.10        | 0.10      |             | 0.10             | 1.30    |            | 9.24    | 1.87       | 0.10             | 0.10    | Arsenic               | 0.0887          |
| Barium, ppm            | Ba   | 2.20        | 5.40      |             | 6.10             | 4.24    |            | 140.90  | 178.83     | 56.45            | 7.80    | Barium                | 1.3035          |
| Beryllium, ppm         | Be   | 0.10        | 0.10      |             | 0.10             | 0.10    |            | 0.10    | 0.10       | 0.10             | 0.10    | Beryllium             | 0.0016          |
| Cadmium, ppm           | Cd   | 0.10        | 0.10      |             | 0.10             | 0.10    |            | 9.68    | 3.35       | 0.10             | 0.10    | Cadmium               | 0.0879          |
| Chromium, ppm          | Cr   | 1.00        | 11.00     |             | 1.70             | 2.20    |            | 134.26  | 2.28       | 0.63             | 1.70    | Chromium              | 1.2371          |
| Lead, ppm              | Pb   | 2.70        | 20.00     |             | 3.40             | 1.70    |            | 107.32  | 96.29      | 3.67             | 0.10    | Lead                  | 1.0063          |
| Mercury, ppm           | Hg   | 0.039       | 0.203     |             | 0.165            | 0.05    |            | 4.706   | 4.341      | 0.148            | 0.002   | Mercury               | 0.0430          |
| Nickel, ppm            | Ni   | 2.90        | 21.00     |             | 1.40             | 2.10    |            | 45.04   | 145.05     | 0.22             | 0.60    | Nickel                | 0.4564          |
| Selenium, ppm          | Se   | 7.20        | 0.2       |             | 0.20             | 0.20    |            | 6.54    | 0.65       | 0.20             | 0.20    | Selenium              | 0.0603          |
| Silver, ppm            | Ag   | 0.10        | 0.2       |             | 0.50             | 0.10    |            | 5.04    | 3.38       | 0.10             | 0.10    | Silver                | 0.0462          |
| Thallium               | Tl   | 0.10        | 0.10      |             | 0.10             | 0.10    |            | 0.10    | 0.10       | 0.10             | 0.10    | Thallium              | 0.0016          |
| Vanadium, ppm          | V    | 0.10        | 1.60      |             | 0.10             | 0.10    |            | 19.49   | 17.41      | 0.27             | 0.20    | Vanadium              | 0.1792          |
| Calcium, ppm           | Ca   | 490         | 335       |             | 170              | 527     |            | 16,214  | 14,211     | 532              | 1,300   | Calcium               | 150             |
| Phosphorous, ppm       | P    | 120         | 33        |             | 150              | 180     |            | 509     | 521        | 5                | 81      | Phosphorous           | 6               |
| Potassium, ppm         | K    | 7           | 7         |             | 7                | 7       |            | 1,330   | 1,634      | 7                | 7       | Potassium             | 12              |
| Sodium, ppm            | Na   | 230         | 170       |             | 2,400            | 5,067   |            | 1,442   | 10,213     | 77               | 130     | Sodium                | 34              |
| Kaolin, wt%            |      | 0.00        | 0.00      | 0.00        | 0.00             | 0.00    |            | 2.57    | 2.40       | 0.00             | 0.00    |                       | 231             |
| Bentonite, wt%         |      | 0.00        | 0.00      | 0.00        | 0.00             | 0.00    |            | 0.00    | 0.00       |                  |         |                       | 0               |
| Reuse Bed, wt%         |      | 0.00        | 0.00      | 0.00        | 0.00             | 0.00    |            | 0.00    | 0.00       | 0.00             | 0.00    |                       | 0               |
| Sawdust, wt%           |      | 0.00        | 0.00      | 0.00        | 0.00             | 0.00    |            | 0.00    | 0.00       |                  |         |                       | 0               |
| NoYd Dirt, wt%         |      | 0.00        | 0.00      | 0.00        | 0.00             | 0.00    |            | 0.00    | 0.00       | 0.00             | 0.00    |                       | 0               |
| Lime Slurry, wt%       |      | 0.00        | 0.00      | 0.00        | 0.00             | 0.00    |            | 0.00    | 0.00       | 0.00             | 0.00    |                       | 0               |
| Lime Grit, wt%         |      | 0.00        | 0.00      | 0.00        | 0.00             | 0.00    |            | 1.12    | 0.00       | 0.00             | 0.00    |                       | 101             |
| Proc Water, wt%        |      | 0.00        | 0.00      | 0.00        | 0.00             | 0.00    |            | 0.00    | 0.00       | 0.00             | 0.00    |                       | 0               |
| Other NonCust, wt%     |      | 0.00        | 0.00      | 0.00        | 0.00             | 0.00    |            | 10.53   | 10.91      | 0.00             | 0.00    |                       | 948             |
| Other NonCust, BTU/lb  |      | 0.00        | 0.00      | 0.00        | 0.00             | 0.00    |            |         |            | 1.98             | 1.00    |                       | 10              |
| CW BTU/POUND           |      | 13,000      | 9,200     | 0           | 1,100            | 410     |            | 3,223   | 4,666      | 3,578            | 410     |                       |                 |
| PRICE PER POUND        |      | 0.045       | 0.045     | 0.500       | 0.125            | 0.125   |            | 0.2752  | 0.3190     | 0.136            | 0.120   | DOLLARS PER HOUR      | 3,186           |
| Cust Waste, %          |      | 100.0       | 100.0     | 100.0       | 100.0            | 100.0   |            | 85.8    | 86.7       | 100.0            | 100.0   | Cust Waste, %         | 92.0            |
| MM BTU/Nozzle/hr.      |      | 0.00        | 3.07      | 0.00        | 0.00             | 0.41    | 0.00       | 6.35    | 0.00       | 0.00             | 0.00    | Kaolin Surplus(Def.)  |                 |
| MM BTU/System/hr.      |      | 18.40       |           |             | 1.64             |         | 6          |         | 0.41       | 0.41             |         | Risk Metals           | 0.0000072       |
| MM BTU/Liquids/hr.     |      | 20.45       |           |             | MM BTU/WS+VL/hr. |         |            |         |            |                  |         | Max % of Limit:       | 0.0000114       |
| Scrubber Stoch Ratio:  | 1.60 |             |           |             |                  |         |            |         |            |                  |         | Feed Ratio            |                 |
| Lime Specific Gravity: | 1.06 | 1.08        | 1.10      | 1.10        | 1.12             | 1.14    | 1.16       | 1.18    | 1.20       | 1.22             |         | Cl:Ca                 |                 |
| Lime Slurry, gpm:      | 5.3  | 3.9         | 3.2       | 3.2         | 2.6              | 2.3     | 2.0        | 1.8     | 1.6        | 1.4              |         | Ash:Na                | 170.2           |

## **8.0 LAND DISPOSAL RESTRICTIONS REQUIREMENTS**

### **8.1 Waste Testing**

#### **8.1.1 Incoming Waste Testing**

All incoming hazardous waste streams are subject to prequalification procedures and conformance testing (with the exception of those wastes identified in Section 4.0), as applicable. Generators whose waste is subject to the Land Disposal Restrictions (LDR) found in 40 CFR Part 268 shall be required to comply with the LDR documentation requirements described in Section 8.2 for each shipment of restricted waste sent to the facility. Consistent with applicable generator State, NDEQ and/or USEPA regulations, CHESI allows generators to submit a one-time only notification for each waste stream. This notification would only need to be resubmitted in the event the process generating the waste changes.

#### **8.1.2 Outgoing Hazardous Waste Streams**

As a generator of hazardous wastes, CHESI shall provide LDR documentation as described in Section 8.2 below for each shipment of hazardous waste that is shipped from CHESI to an offsite treatment or disposal facility. Consistent with applicable NDEQ, USEPA and/or the destination facility State requirements, CHESI may submit a one-time only notification for each waste stream. This notification would only need to be resubmitted in the event the process generating the waste changes.

There are two types of hazardous wastes that may be shipped from the facility:

- Wastes that are produced by CHESI through onsite treatment processes (e.g. sorting debris) are ultimately shipped offsite to a designated facility for additional treatment and disposal.
- Wastes that are accepted for storage/transfer or transshipment, and that are transferred to an offsite facility in their original container or in bulk or repackaged form without any onsite treatment.

CHESI shall determine the LDR status of the hazardous waste streams produced at the site, as described in 40 CFR 268, by applying its knowledge of the waste or



by conducting analytical testing prior to shipment. In the case of non-treatment storage/transfer wastes, CHESI may rely on the information provided by the original generator (as verified by the CHESI's waste acceptance procedures) to determine the specific LDR status of the waste.

## **8.2 Land Disposal Restrictions (LDR) Documentation Requirements**

CHESI is responsible for maintaining copies of the LDR documentation accompanying manifests of incoming waste as part of its operating record. CHESI is also responsible for preparing and keeping copies of LDR documentation associated to each applicable load of hazardous waste that is generated at the facility and subsequently shipped to an outside TSDF for disposal. The LDR notification form's format may vary as allowed by USEPA, with the content meeting the requirements of 40 CFR 268.7. Pursuant to these requirements, sections 8.2.1 through 8.2.3 below describe required CHESI activities associated to LDR documentation.

LDR notifications may either accompany the load as part of the manifest, be electronically transmitted to the facility by the Generator (or Generator's representative – known henceforth as “the Generator”) as being associated to the load, or the LDR may be a one-time notification maintained on file at the discretion of the facility.

### **8.2.1 Incoming Waste Streams**

Documentation accompanying incoming RCRA hazardous waste shipments are checked for compliance with LDR documentation requirements specified in 40 CFR 268.7 as outlined below.

- a) LDR Notification should be provided when – In general, incoming shipments of USEPA RCRA regulated hazardous wastes that fail to meet the applicable treatment standard(s), and/or as an optional mechanism for the required reporting of applicable Underlying Hazardous Constituents (UHCs).
- b) Required Content – The specific required content of the LDR notification is dependent upon how the waste in question is regulated. 40 CFR 268.7(a) provides a table that specifies when a specific reporting item is required to be included in the LDR. Clean Harbors may also require the

Generator to report additional information based on Permit and operational need.

- c) Notification Forms - At its discretion, Clean Harbors maintains standardized forms for Generators use.

Typically,

- a “Generator Notification Form” is available for wastes which do not meet applicable treatment standards, and
- a “Generator Notification/Certification Form” is available for wastes which meet applicable treatment standards.

### **8.2.2 Outgoing Hazardous Waste Streams**

CHESI is considered the Generator of RCRA/NDEQ regulated hazardous wastes shipped from the facility, except when performing transfer operations. As such, the facility complies with the LDR Generator Record Keeping requirements of 40 CFR 268.7(a), and will provide appropriate LDR documentation for each outgoing shipment of restricted waste.

Similar to the case in Section 8.2.1(c), a generator’s hazardous waste which does not meet the applicable LDR treatment standards shall be accompanied by a “Generator Notification Form” or similar. Wastes which are determined through testing or knowledge to meet applicable treatment standards are accompanied by a “Generator Notification/Certification Form”.

### **8.2.3 Record Retention**

CHESI retains copies of notification and other LDR documentation (for both incoming and outgoing shipments) as part of the operating record for at least three years. CHESI may maintain these records onsite, on the Clean Harbors electronic WINWeb system or at an offsite location that can be readily accessed.

## 9.0 WASTE SAMPLING AND ANALYTICAL METHODS

### 9.1 Sampling Methods [40 CFR 264.13(b)(3), 264.13(b)(6) and 264.13(c)(2)]

Trained CHESI personnel shall perform waste sampling required by this plan. The procedures and equipment used by CHESI for sampling purposes are based on those referenced in 40 CFR 261, Appendix I, which are summarized in Table C2-3 to ensure the retrieval of reliable and representative samples. Specific sampling procedures shall be dependent upon the nature of the material and upon the type and size of container.

The types of containers requiring sampling may include portable units (e.g. drums, tanks, roll off containers, and tank trucks) or stationary units (e.g. bulk storage tanks). The sampling devices are selected depending on the size and type of the container, and on the specific material involved.

Sampling of all containers varies with the nature of the waste material. For small flowable materials, a COLIWASA unit or rigid tube is used to obtain a vertical section sample. For large containers of flowable materials, a COLIWASA unit, a rigid tube, a weighted bottle, or a bomb may be used to obtain a vertical section. Solids or non-flowable materials are sampled with a trier, tubing, thief, scoop, or shovel. Solid or non-flowable waste tank sediments are sampled from a bottom sampling valve when not accessible from the top access ports. All tank trucks shall be sampled from the top access ports or from the bottom sampling valve. Direct feed containers may be sampled after the container has been connected to the direct feed offload system. In this case, the sample is taken through a closed system downstream from the container.

**Table C2-3 Sampling Methods and Typical Equipment**

| Material                         | Method*    | Equipment                                      |
|----------------------------------|------------|--|
| Low Viscosity Liquids            | ASTM D5495 | COLIWASA or tubing                             |
| Extremely Viscous Liquid         | ASTM D5743 | Tubing or thief                                |
| Liquids in Pits, Ponds, or Tanks | ASTM D5358 | Pond sampler, weighted bottle, or bomb sampler |
| Crushed or Powdered Material     | ASTM D5451 | Tubing, trier, scoop, or shovel                |

|                            |            |                         |
|----------------------------|------------|-------------------------|
| Soil or Rock-Like Material | ASTM D5633 | Trier, scoop, or shovel |
|----------------------------|------------|-------------------------|

\* With subsequent updates

## 9.2 Analytical Methods [40 CFR 264.13(b)(2)]

Procedures are developed for analytical methods that may be used in analyzing prequalification, conformance testing, feed control parameters, and/or ash/residue utilized under this plan. These procedures are derived from the methods listed in Table C2-4 and/or Appendix C2-2. The procedures utilized are consistent with “standard methods” approved by the USEPA and/or ASTM, or CHESI-developed methods. All methods of analyses shall be performed by trained CHESI personnel or another reputable analytical testing laboratory. Other methods published in USEPA Test Methods for Evaluating Solid Waste, Physical/Chemical Methods (SW-846), ASTM, or Standards Methods for Water and Waste Water may be utilized to provide additional information as needed.

**Table C2-4 Analytical Methods**

| Parameters                            | Method*  |
|---------------------------------------|--|
| Ash                                   | ASTM D5468<br>ASTM D3174   |
| Viscosity                             | ASTM D88   |
| Ignitability                          | ASTM D93<br>ASTM D3278   |
| Specific Gravity and Bulk Density     | ASTM D5057   |
| Corrosivity and pH                    | SW-846 1110<br>SW-846 9040<br>SW-846 9041<br>ASTM D4980                                |
| Total Halogens and Ion Chromatography | SW-846 9056  |
| Reactivity Screens                    | ASTM D5058<br>ASTM D4978<br>ASTM D4981<br>ASTM D5049                                   |
| Metals                                | SW-846 6010<br>SW-846 6020<br>SW-846 7471<br>SW-846 7470                               |
| Cyanides                              | SW-846 9014  |
| Organics                              | SW-846 8015<br>SW-846 8081<br>SW-846 8082<br>SW-846 8151<br>SW-846 8260<br>SW-846 8270 |

|  |  |
|--|--|
|  | SW-846 8280<br>SW-846 8290<br>ASTM D6160 |
|--|--|

\* With subsequent updates

## 10.0 ASH/RESIDUE EVALUATION METHODS

Combinations of ash and TOU related materials are evaluated prior to placement of the wastes in the monofill. Figure C2-3 illustrates the evaluation steps used to determine the processing of ash/residues before being placed in the monofill. Evaluation of these materials is addressed in NDEQ Title 128, Appendix IV. These steps determine if the ash/residue is solidified or stabilized before the material is placed in the monofill.

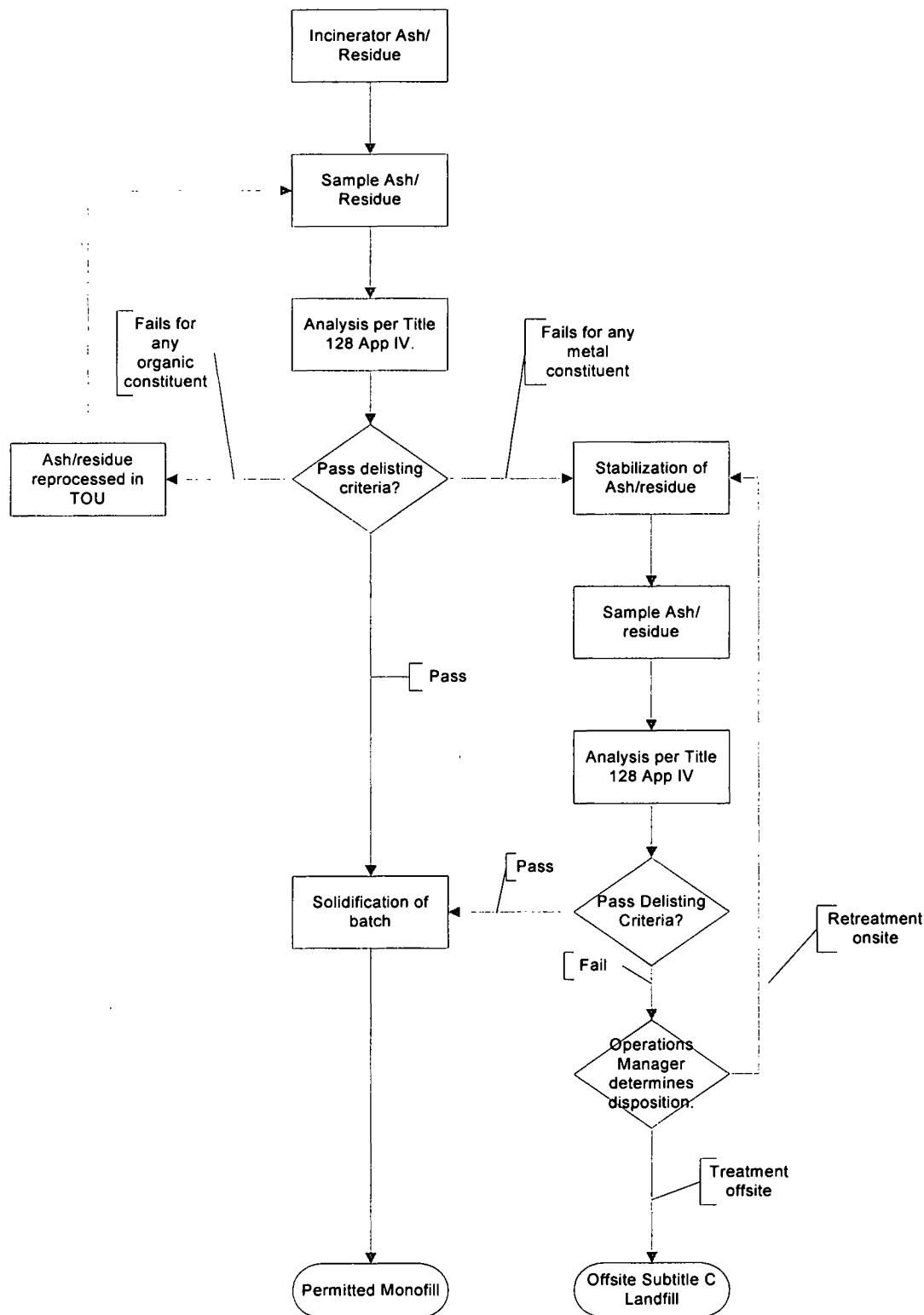


Figure C2-3 Ash/Residue Handling and Storage

## **10.1 Ash Sampling**

Ash sampling is performed utilizing a continuous sampling system that is programmed to extract the samples of ash as a day bin is filling. After the day bin is full, all sample containers collected during the filling process are combined and the composite sample is analyzed for the delisting parameters. If the delisting criteria are met, the ash may proceed to the monofill.

In the event the ash does not meet a metal delisting parameter and a stabilization process has not been demonstrated utilizing the Multiple Extraction Procedure (MEP) identified in Title 128 Appendix IV, the ash may either be transferred through the mixer and into bulk containers for subsequent handling or, if CHESI chooses to demonstrate a stabilization process, the MEP demonstration may begin.

If the ash is transferred to bulk containers without stabilization, each bulk container will be sampled utilizing sampling methods discussed in Section 9.1, and the resulting samples will be analyzed individually corresponding to each container for the parameter(s) that was exceeded. If the value(s) for the delisting parameter(s) that was not met in the initial sampling event continues to exceed the delisting limit(s), the ash in the corresponding container will be handled as a hazardous waste. If a sample from any container is less than the delisting limit for which it originally exceeded, the container will be re-sampled and analyzed again for the parameter that was originally exceeded. If the analysis of the re-sample exceeds the delisting limit, the ash in the corresponding container will be handled as a hazardous waste. It will be shipped, depending on the exceeded parameter, to an designated facility or stabilized onsite based on an approved MEP. If the analysis of the re-sample is less than the delisting limit, the ash in the corresponding container may proceed to the monofill.

If CHESI intends to proceed with an MEP demonstration, the ash will be transferred to the mixer where the stabilization agent will be added. Each mixer load will be sampled utilizing a scoop prior to and following the addition of the stabilization agent. The ash will then be transferred to a bulk container. The mixer load samples corresponding to each bulk container will be composited and analyzed for the delisting parameter which was exceeded. If the analysis indicates the delisting parameter in question prior to

stabilization is below the delisting limit, the corresponding container will be re-sampled utilizing procedures outlined in Section 9.1 and analyzed for the delisting parameter in question. If the level continues to be less than the delisting limit, the ash may proceed to the monofill. The container samples taken prior to stabilization that fail the delisting parameter in question will be utilized in the MEP demonstration.

In the event the ash does not meet a metal delisting parameter and a stabilization process has been demonstrated and approved by the NDEQ, the ash will be transferred to the mixer and stabilized using the approved process. The ash will be transferred from the mixer to a bulk container. The bulk container will be sampled following procedures outlined in Section 9.1 and analyzed for the delisting parameter in question. If the analysis indicates the delisting level has been met, the ash may proceed to the monofill. If not, the stabilization was not successful and the ash will continue to be handled as a hazardous waste.

## **10.2 Ash Analysis**

The evaluation of the ash/residue is for five general areas of analysis:

- Toxicity Characteristic Leaching Procedure (TCLP) for metals
- TCLP for organics
- Site specific extraction for selected organics
- Dioxins/Furans
- Selected Wet Chemistries

All ash analyses will be conducted in accordance with Title 128, Appendix IV consistent with methods delineated in Table C2-4 of Section 9.2, as applicable. Any batch of ash/residue which fails the delisting requirements and is sent offsite to a designated facility is evaluated for adherence to land ban restrictions and profiled onsite.

### **10.2.1 Toxicity Characteristic Leaching Procedure for Metals**

Evaluation of ash samples for leachable metals is conducted by the Toxicity Characteristic Leaching Procedure (TCLP), Method 1311. Results of this metal evaluation is compared to the levels in the delisting document to determine if the ash has met delisting criteria. Those samples that fail to meet the delisting criteria and where there is an NDEQ approved stabilization procedure in place are



stabilized before being placed in the monofill. Failure to meet the delisting criteria for all other metals identified in Title 128, Appendix IV will be shipped off-site to a designated facility for additional treatment and disposal or if CHESI chooses to demonstrate stabilization process, the MEP demonstration may begin. The TCLP method involves the extraction of the sample using a predetermined extraction solution. The mixture is agitated for 18 hours  $\pm$  2 hours and then filtered. The filtrate is analyzed for soluble metals. The methods used for analysis are delineated in Title 128, Appendix IV.

#### **10.2.2 Toxicity Characteristic Leaching Procedure for Organics**

Evaluation of ash samples for leachable organics is conducted by bicarbonate/TCLP extraction. Once the samples are extracted and filtered, the organics are analyzed as delineated in Title 128, Appendix IV. Results of this evaluation are compared to the levels in the delisting document to determine if the ash has met delisting criteria.

#### **10.2.3 Dioxin/Furan Analysis**

The extracts are concentrated and analyzed by GC/MS using SW-846 Methodology. Ash samples are analyzed for the 2, 3, 7, 8 substituted congeners, tetra- to octachloro dibenzo-p-dioxins and dibenzofurans. Any concentration of these compounds are converted to 2, 3, 7, 8-TCDD equivalents before the results are reported. Results of this evaluation are compared to the levels in the delisting document to determine if the ash has met delisting criteria.

#### **10.2.4 Selected Wet Chem Analytes**

The extracts are analyzed by SW-846 methodology for total cyanides, fluoride and formate. Results of this evaluation are compared to the levels in the delisting document to determine if the ash has met delisting criteria.

#### **10.2.5 Reporting Data for Ash Evaluations**

All methods of analysis used in the evaluation of the ash/residue are required in order to analyze the samples with detection limits below the delisting levels.

Practical Quantitation Limits (PQL) or laboratory established Limits of Quantitation (LOQ) are established for each procedure. For the parameters of concern with deslisting the ash/residue, PQLs and delisting levels are reported in NDEQ Title 128, Appendix IV. These listed PQLs are at or below delisting requirements.

## **11.0 WASTE DETERMINATION PROCEDURES [40 CFR 264.13(B)(6)]**

Pursuant to 40 CFR 264.13(b)(6), the Waste Analysis plan must specify, where applicable, the methods that will be used to meet the additional waste analysis requirements under the Subpart AA standards for process vents, BB standards for equipment leaks and the Subpart CC standards for tanks, containers, and surface impoundments. This section explains the applicability of the waste determination procedures and the additional waste analysis requirements to the CHESI facility.

### **11.1 Process Vents [40 CFR 264.1032(c)]**

The CHESI facility does not operate any process vents associated with a hazardous waste distillation, fractionation, thin-film evaporation, solvent extraction, or air or steam stripping operation. Therefore, the test methods and procedures referenced in 40 CFR 264.1032(c) are not applicable.

### **11.2 Equipment Leaks [40 CFR 264.1063(d)]**

Subpart BB of 40 CFR Part 264 applies to equipment such as valves, flanges, and pumps that contain or contact hazardous waste with organic concentrations of at least 10 percent by weight. Each piece of equipment that contains or contacts hazardous waste is managed in accordance with the Subpart BB equipment leak standards.

The hazardous waste organic content is determined by using various methods as described in 40 CFR 264.1063(d) subparagraphs (1), (2), and (3). This is accomplished by using data available from various ASTM or SW-846 tests that may have been conducted for the purposes of waste profiling, waste acceptance, or waste processing. In addition, generator knowledge and process knowledge may be used to make this determination. The data and documentation used to make the determination is documented in the waste profile.

### **11.3 Tanks and Containers [40 CFR 264.1083]**

Pursuant to 40 CFR 264.1083(a) and (b), the average volatile organic concentration must be determined for any hazardous waste that is placed in a waste management unit that is exempted from using air emission controls. CHESI does not manage hazardous waste in waste management units that are exempted from emission controls based on the volatile organic content. Therefore, the waste determination procedures in 40 CFR 264.1083(a) and (b) are not applicable with the exception of the tanks in the following paragraph which are part of the contact stormwater management system at the facility.

Tanks T-616, T-688 and T-926B receive liquids from Chem Sewer and sumps containing contact stormwater. This water is then used as “process water” and may ultimately be fed to the incinerator either as tanker rinse water, a lean water tank feed or a wet solids blend. The liquids are managed under an in-house profile which requires an annual sample for recertification. The in-house profile and recertification is used for the waste determination required in 40 CFR 264.1083(a) and (b).

Pursuant to 40 CFR 264.1083(c), owners or operators of tanks using Tank Level 1 controls must determine the maximum organic vapor pressure for each hazardous waste placed in the tank. The hazardous waste tanks located at the CHESI facility use Tank Level 2 controls. Therefore, a maximum organic vapor pressure determination for each waste stream is not required.

## **12.0 REFERENCES**

NDEQ Title 128, Chapter 13, Section 012.02, "Permit Application," Nebraska Department of Environmental Quality, August 2007.

NDEQ Title 128, Chapter 21, "Standards for Owners and Operators of Hazardous Waste Treatment, Storage and Disposal Facilities," Nebraska Department of Environmental Quality, August 2007.

NDEQ Title 128, Appendix IV, "Wastes Excluded from Title 128, Chapter 3", Nebraska Department of Environmental Quality, June 2001.

40 CFR 264. 12(b), "Required Notices," Code of Federal Regulations, Office of the Federal Register, July 2013.

40 CFR 264.13, "General Waste Analysis," Code of Federal Regulations, Office of the Federal Register, July 2013.

40 CFR 264.17, "General Requirement for Ignitable, Reactive, or Incompatible Waste," Code of Federal Regulations, Office of the Federal Register, July 2013.

40 CFR 268, "Land Disposal Restrictions," Code of Federal Regulations, Office of the Federal Register, July 2013.

40 CFR 270.14 (b), "Contents of Part B: General Requirements," Code of Federal Regulations, Office of the Federal Register, July 2013.

SW-846, "Test Methods for the Evaluation of Solid Waste, Physical/Chemical Methods,"

American Society for Testing and Materials (ASTM).

**APPENDIX C2-1**  
**GENERATOR'S WASTE MATERIAL PROFILE SHEET**

**APPENDIX C2-2**  
**CONFORMANCE TESTING PARAMETERS**

## APPENDIX C2-2

### CONFORMANCE TESTING PARAMETERS

The following parameters (known as the Great 8) are tested in Conformance Testing:

| Parameter                       | Testing Type                                 |
|---------------------------------|--|
| Physical Description            | Visual                                       |
| Ignitability Screen             | Flame, or<br>SetaFlash, or Pensky<br>Martens |
| Oxidizer Screen                 | Potassium Iodide Starch<br>Paper             |
| Cyanide Screen                  | Cyantesmo Paper or Gas<br>Detector Tube      |
| Sulfide Screen                  | Lead Acetate Paper or Gas<br>Detector Tube   |
| pH Screen                       | pH Paper or Meter                            |
| Water<br>Miscibility/Reactivity | Visual                                       |
| Radiation Screen                | Radiation Survey Meter                       |

For the above parameters, procedures developed from the Clean Harbors Facility Pocket Guide methods, or optionally procedures developed from the methods listed in Table C2-4 of Section 9.2, are utilized.

**Attachment 8**  
**CHESI Contingency Plan Redline Copy**



## **SECTION F**

# **CONTINGENCY PLAN**

## **Section F**

### **Contingency Plan**

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## ACRONYMS

|        |  |
|--------|--|
| CCO    | Casualty Control Officer                     |
| CPR    | Cardio Pulmonary Resuscitation               |
| CHESI  | Clean Harbors Environmental Services, Inc.   |
| EC     | Emergency Coordinator                        |
| EMT    | Emergency Medical Technician                 |
| ERT    | Emergency Response Team                      |
| FCM    | Facility Compliance Manager                  |
| HAZMAT | Hazardous Material                           |
| KRFD   | Kimball Rural Fire Department                |
| LEPC   | Local Emergency Planning Committee           |
| NDEQ   | Nebraska Department of Environmental Quality |
| NFPA   | National Fire Protection Association         |
| RQ     | Reportable Quantity                          |
| SARA   | Superfund Amendments and Reauthorization Act |
| SDS    | Safety Data Sheets                           |
| SERC   | State Emergency Response Commission          |
| TOU    | Thermal Oxidation Unit                       |
| TSDF   | Treatment, Storage or Disposal Facility      |
| UV/IR  | Ultra Violet/Infrared                        |

## **1.0 INTRODUCTION**

Clean Harbors Environmental Services, Inc. (CHESI) has developed this Contingency Plan to describe the procedures CHESI undertakes to protect human health and prevent environmental damage in the event of an emergency at the Kimball, Nebraska facility.

This information is submitted in accordance with the requirements for a hazardous waste facility Contingency Plan, as contained in Nebraska Department of Environmental Quality (NDEQ) Title 128 (Nebraska Hazardous Waste Regulations) and the U.S. EPA regulations in 40 CFR 270.14(b)(7) and 40 CFR Part 264, Subpart D.

## **2.0 CONTENT OF THE CONTINGENCY PLAN [40 CFR 264.52]**

The Plan describes the actions facility personnel take to respond to fires, explosions, or any unplanned sudden or non-sudden release of hazardous waste or hazardous waste constituents to the air, soil, or surface water at the facility. This plan also includes provisions for emergency response training sessions for CHESI facility personnel (see Part G, Personnel Training Program, for additional information), the development and training of CHESI's Emergency Response Team (ERT), and the notification and use of local emergency response organizations.

Procedures and responsibilities have been developed outlining the layout of the CHESI facility, location of possible hazards, location and operation of emergency equipment, evacuation plans and routes of escape, and power cutoffs. The Plan is implemented by CHESI during an emergency as described in Section 7.0.

## **3.0 EMERGENCY COORDINATORS [40 CFR 264.52(d), 40 CFR 264.55]**

The primary Emergency Coordinator (EC) and designated ECs are listed in Appendix F-1. The primary EC has the ultimate authority to take control of emergency situations when present at the CHESI facility. Other employees have been designated and trained as ECs.

The primary and additional ECs have CHESI's authority to commit the resources needed to implement this plan. To function in this capacity, those employees must:

- be knowledgeable of the entire CHESI facility;
- have knowledge of emergency and evacuation procedures;
- effectively use safety and communications equipment;
- understand basic first aid/Cardio Pulmonary Resuscitation (CPR);
- have undergone fire extinguisher/fire fighting training;
- be thoroughly familiar with all aspects of the facility's contingency plan, all operations and activities at the facility, the location and characteristics of waste handled, the location of all records within the facility, and the facility layout;
- have the authority to commit the resources needed to carry out the contingency plan.

The primary EC, when on call, is accessible by radio, phone, or pager, and is available to respond when needed. If the primary EC is not onsite, a designated EC is authorized and required to assume immediate responsibility for any incident requiring implementation of the Contingency Plan. The primary EC may assume responsibility when he/she arrives at the CHESI facility. Section 8.0 outlines the EC responsibilities regarding notification requirements and emergency response procedures.

#### **4.0 EMERGENCY RESPONSE TEAM**

An emergency response team (ERT) has been organized for the purpose of providing quick, efficient response to all onsite emergency situations. The primary EC leads the ERT and is responsible for establishing and supervising the ERT, and ensuring that ERT members are properly trained. The operation of the ERT during an emergency is the responsibility of the EC.

The names of the primary EC and additional ECs have previously been provided to NDEQ and applicable local emergency response agencies. The names and other pertinent information are provided in Appendix F-1. Updated lists are sent to NDEQ and local agencies within 30 days of any change in the primary EC or additional ECs.

The primary EC is responsible for coordinating all joint CHESI facility and local ERT training activities. Comprehensive emergency training exercises for the ERT responding to onsite incidents occur at least annually. Less inclusive emergency preparedness drills (e.g., tank fire, truck leaks, personnel injury, decontamination practices) are planned by the primary EC and conducted at intervals throughout each year. The ERT also makes

joint training exercises available to local emergency response groups (e.g., Hazardous Material (HAZMAT) unit, fire, police, and ambulance service). The training may include offsite and onsite emergencies involving hazardous wastes and responses to fires and spills. This training uses both onsite and available offsite equipment.

For incidents requiring implementation of this plan, the primary EC or the designated EC (if the primary EC is not present) has responsibility for initial response and emergency coordination activities through his/her direction of the ERT. If shipments of waste to the CHESI facility are involved in accidents in Kimball County, Nebraska, the ERT is equipped and ready to respond to the incident if called upon by local response organizations. The ERT is also available to provide support to emergency situations in Kimball County if the situation might exceed the capacity of local response agencies.

Selected ERT members are provided annual emergency response/fire-fighting training courses or seminars to be held onsite or at a CHESI-approved offsite facility. The CHESI facility also pays for at least two representatives from the local municipal ERT to maintain local emergency readiness at a level comparable to the CHESI facility ERT.

## **5.0 ARRANGEMENTS WITH LOCAL AUTHORITIES/ RESOURCES [40 CFR 264.52(c)]**

CHESI has contacted state and local authorities that may possibly be involved in an emergency situation at the CHESI facility. CHESI has made a diligent effort to negotiate emergency support agreements, document in the operating record any acceptance or refusal by state or local authorities to enter into such agreements, and provide a copy of the CHESI facility current plan and relevant background information to all local agencies that may be called in an emergency. Meetings to discuss specific involvement and coordination are held at least annually to maintain current information within the organizations. Revisions to this plan are provided to local authorities as required by 40 CFR, Section 264.53(b).

### **5.1 Local and Regional Agencies and Authorities**

Local and regional agencies and authorities that have been contacted concerning emergency events at the CHESI facility include:

- Kimball Volunteer Fire Department
- Kimball Police Department

- Kimball County Sheriff's Department
- Nebraska State Patrol
- Kimball County Hospital
- Kimball County Ambulance Service
- Nebraska Department of Environmental Quality
- Kimball Rural Fire Department Board
- Nebraska State Fire Marshall (fires & explosions only)
- Kimball County Emergency Management Coordinator or LEPC

## **5.2 Copies of the Plan [40 CFR 264.53]**

A copy of the current Contingency Plan has been filed with the NDEQ, Kimball County Sheriff Department, Kimball Police Department, Nebraska State Patrol, Kimball Volunteer Fire Department, Kimball County Hospital, Kimball County Ambulance Service, Kimball Rural Fire Department Board, and Nebraska State Fire Marshall. The plan and any subsequent revisions are also maintained at the CHESI facility. If revisions to this plan are made, local and state authorities are duly notified in accordance with NDEQ Title 128 and 40 CFR 264.53 and 40 CFR 264.54.

## **6.0 AMENDMENTS OF THE CONTINGENCY PLAN [40 CFR 264.54]**

CHESI personnel review the adequacy of the existing plan with respect to any modification to the facility permit or facility operations resulting from the following:

- Expansion;
- Change in the type or quantity of waste handled;
- Other changes that may affect the degree or potential severity of a possible emergency;
- Change in the response actions necessary during an emergency.

In addition to amendments made to the plan as a result of modifications to the permit or facility operations described above, amendments are also triggered by:

- Failure of the plan during an emergency;



- Changes in the list, type or function of emergency equipment that could significantly impact emergency response capabilities;
- Personnel changes in the primary and ~~additional~~ additional EC's and ERT designations;
- Changes in applicable regulations.

If required, amendments are submitted to NDEQ for review and approval. Upon NDEQ approval, the amendments are distributed to local authorities identified in this plan. If the plan is implemented in an emergency and fails, the NDEQ is notified and immediate revisions are made to prevent recurrence resulting from the same factors.

All local response agencies identified in this plan receive an updated copy of the plan as soon as possible after changes have been submitted to and approved by NDEQ.

The EC conducts debriefings of CHESI facility personnel and local authorities after an incident to assess preparedness, response effectiveness, casualty control, and evacuation procedures. Based on this review, suggestions are made to CHESI facility management and the Contingency Plan is amended as appropriate.

## **7.0 CONTINGENCY PLAN IMPLEMENTATION CRITERIA**

The Contingency Plan is implemented whenever any one of the following situations occurs:

- A fire that:
  - ❖ Causes, or could cause, the release of toxic fumes, or
  - ❖ Spreads and could possibly ignite nearby fuel oil or other wastes or could cause heat-induced explosions, or
  - ❖ Could spread between buildings or to adjacent buildings, or
  - ❖ Could possibly spread offsite, or
  - ❖ Results in the offsite migration of contaminated water and chemical fire suppressant run-off offsite.
- If any one of the situations occurs, any explosion or an imminent danger exists that an explosion could:
  - Occur causing a safety or health hazard, or
  - Ignites other materials onsite, or

- Results in the release of toxic material.
- A spill or material release that:
  - Cannot be contained onsite, resulting in a potential for offsite soil or groundwater contamination, or
  - Could result in a potential release resulting in groundwater contamination, an explosion, or fire
- A tornado that:
  - Causes, or could cause, the release of toxic fumes, or
  - Occurs causing a safety or health hazard, or
  - Results in the release of toxic material

For the purposes of this Contingency Plan, the following do not constitute unauthorized discharges into the air, land, groundwater or surface water and therefore do not require notification to the regulatory agencies:

- Spills or leaks of hazardous waste from containers into secondary containment;
- Spills or leaks of hazardous waste from containers into the environment in quantities less than the Reportable Quantity (RQ);
- Releases of hazardous waste from a tank/tank system into secondary containment;
- Releases of less than one pound of hazardous waste from a tank/tank system into the environment that are immediately cleaned up.

## **8.0 EMERGENCY RESPONSE PROCEDURES [40 CFR 264.56]**

This section outlines emergency response procedures and responsibilities for notifying NDEQ, local response agencies, nearby communities, and adjacent landowners and businesses if a potentially hazardous release occurs from the CHESI facility that may have a significant effect outside the CHESI facility property.

### **8.1 Initial Assessment and Internal Notification [40 CFR 264.56(a)(1), (b), (c)]**

Employees observing a potentially hazardous event (e.g., fire, explosion, spill or leak) without endangering themselves, assess the nature and severity of the occurrence to a degree appropriate to their training, experience, and job

responsibilities. They then use their best judgment in the context of their knowledge of the materials and equipment involved to decide how to respond. In making this decision, they consider their own normal job responsibilities, training in hazardous materials management and emergency response (including the provisions of this plan), and facility operations. Any immediate response action by the first observer is in accord with their job duties and responsibilities under the supervision of their supervisor.

Actions taken are either of the following:

- To first protect and ensure the safety of personnel and then to provide appropriate direct response to the incident within the scope of their trained capabilities, followed by reporting the incident to the area supervisor;
- To immediately report the event to the area supervisor or to the EC, if the first observer is unsure if the situation constitutes an emergency, or it is beyond their trained capabilities, and then proceed under the direction and supervision of the supervisor or EC. The supervisor, once alerted, notifies the EC if necessary based on an assessment of the situation.

Once alerted to an emergency situation, the EC assesses the situation to determine any possible hazard to human health or the environment that may result from the release, fire, or explosion and determines if the plan is to be implemented.

If the EC determines that the CHESI facility has experienced or has the possibility to have an incident (e.g., spill, fire, or explosion) that could threaten human health or the environment inside the CHESI facility or outside the facility boundaries, onsite personnel are notified and the incident is assessed, considering the following:

- Identify persons on the scene and the person to contact for information;
- Account for all personnel on the plant site;
- Identify any injuries resulting from the emergency;
- Identify material spilled, exploded, or on fire;
- Establish the time of the incident;
- Establish and identify the location of the incident, and proximity of navigable waters of the State and/or incident drains that may be involved

(Note: The nearest navigable water is Lodgepole Creek located seven miles north of the CHESI facility);

- Identify the source and cause of the incident;
- If a spill, determine the material spilled, estimate the volume of the spill that has been or could be released and anticipated movement;
- Identify equipment or apparatus that was involved;
- Identify measures taken to control the incident;
- Note the existing weather conditions (e.g., rain, wind, wind direction, and speed) and consider these in specifying response measures to be taken;
- Specify the type of response and cleanup operations to be performed;
- Determine whether there is significant effect outside the CHESI facility fence perimeter and whether evacuation of local areas is advisable;
- Estimate how long the release will last.

Response activities are then coordinated and directed with the first priority being to protect human health and safety. The EC and supervisor(s) of operating area(s) work together to assess the possible hazards to human health and the environment that may result from a release, fire, or explosion. This assessment must consider both direct and indirect effects of any toxic, irritating, or asphyxiating gases that are generated as outlined in Waste Data Sheets or Safety Data Sheets (SDS) for the materials involved, or the effects of any hazardous substances and surface run-off from chemical agents used to control fire and heat-induced explosions.

When the incident has been corrected, the authorization is given by the EC to place an "All Clear" call.

## **8.2 External Notification [40 CFR 264.56(a)(2), (d)(1), (d)(2)]**

### **8.2.1 Threats to Human Health and the Environment Offsite**

If the EC determines that the facility has had a release, fire, or explosion that could threaten human health or the environment outside the facility property, and the EC assessment indicates that evacuation of local areas may be advisable, the EC or qualified designee shall immediately notify appropriate local authorities. The EC or qualified designee must also be available to help appropriate officials decide whether local areas should be evacuated.

In addition to notifying local officials, the EC or qualified designee shall also immediately notify the Facility Compliance Manager (FCM), or designee, who will notify the NDEQ. If an incident has the potential to cause a fire or explosion outside the facility boundaries, the EC, or qualified designee, immediately notifies the Kimball County Sheriff's Department after discovery of the event.

All telephone notifications concerning emergencies which could impact offsite human health or the environment are directed to:

|                                     |                             |
|-------------------------------------|-----------------------------|
| National Response Center (NRC)      | 800-424-8802                |
| NDEQ                                | 402-471-2186                |
| Kimball County Sheriff's Department | 308-235-3615                |
| Nebraska State Patrol               | 402-471-<br><u>45454921</u> |

The following information is provided in telephone notifications:

- Name of the person making the notification and the telephone number where any return calls from response agencies can be placed;
- Name and address of the facility;
- Time and type of incident (e.g., release, fire);
- Name and quantity of material(s) involved, to the extent known;
- Extent of injuries, if any;
- Possible hazards to human health or the environment outside the facility.

In the event the EC determines local evacuation is appropriate, a siren is activated by the EC. The siren may be heard for a two-mile radius, and can be manually activated from the control room. A telephone, located onsite, is dedicated during the emergency for the purpose of notifying local authorities.

### **8.2.2 Other Incidents Requiring Plan Implementation**

If a fire, explosion, or unauthorized discharge requiring implementation of the Contingency Plan occurs that does not threaten human health or the environment offsite, the FCM or designee notifies the NDEQ immediately, but in no case later than 24 hours after learning of a discharge. This notification is by telephone.

CHESI uses the emergency number or the agencies telephone number during working hours:

|                                     |                 |
|-------------------------------------|-----------------|
|                                     | Monday-Friday   |
| NDEQ Responsible Division           | 8:00am - 5:00pm |
| Air Quality Division                | 402-471-2189    |
| Water Quality Division              | 402-471-4700    |
| Waste Management Section            | 402-471-4210    |
| Ground Water Section                | 402-471-0096    |
| Kimball County Sheriff's Department | 308-235-3615    |
| Nebraska State Fire Marshal         | 402-471-2027    |

All telephone numbers are corrected whenever changes occur.

The following information is provided to the NDEQ as part of this notification:

- Name of the person making the notification and the telephone number where any return calls from response agencies can be placed;
- Name and address of the facility;
- Time and type of incident (e.g., release, fire);
- Name and quantity of material(s) involved, to the extent known
- Extent of injuries, if any.

### **8.3 Identification of Hazardous Materials**

Profiles identifying the waste stream constituents are maintained in the laboratory, or are available through Clean Harbors Win Web system. The most recent Safety Data Sheets (SDS) characterizing the hazards of the materials stored and treated at the facility are available on line.

These files contain pertinent data on the waste chemicals at the facility including:

- Identification of chemical components in each waste stream;
- Identification of waste characteristics (e.g. toxicity, ignitability, etc.);
- Important chemical and physical properties for which data are available, such as vapor pressure, pH, and solubility in water;
- Procedures to counteract human exposure (e.g., thorough washing with soap and water in the event of dermal contact).

Additional information may also be obtained from the individual waste characterization analyses retained at the facility. All waste receipts and waste inventory at the facility are tracked by a waste tracking system.

The locations of received wastes are entered into the computer system by CHESI personnel. A transfer of waste from one container or tank to another is entered into the computer system by CHESI personnel to ensure accurate tracking and location. Computer work stations are provided in the control room and at various locations throughout the facility for all waste tracking activities.

#### **8.4 Emergency Response Procedures [40 CFR 264.52(a) and (e)]**

Potential accidents that could cause implementation of the plan may include fires, explosions, spills, or airborne material releases.

The following sequence of events constitutes the specific responses and control procedures to be taken in the event of a fire, explosion, or release of hazardous waste to air, land, or water. The initial response to any emergency shall be to protect human health and safety, and secondarily the environment. Secondary response to an emergency consists of identification, containment, treatment, and disposal assessment.

##### **8.4.1 Fire, Explosion, or Chemical Reaction**

If a fire, explosion, or adverse chemical reaction occurs that could affect the operation of Area 45 the Thermal Oxidation Unit (TOU) and waste feed systems appears to be imminent or has already occurred, all TOU activities are stopped immediately under the direction of the EC. Waste

feed is manually or automatically shut off, and the TOU is shut down in an orderly and environmentally safe manner.

In the event of a fire or explosion in waste processing areas, the automatic sprinkler systems may be activated, and the EC will be notified and take command. All equipment that may be affected will be shut down immediately and waste feed cut-offs will be initiated. If the fire or explosion occurs where liquids are stored and a spill occurs, procedures for spill containment will commence as soon as the fire is under control. In all cases, the EC will be notified.

If the facility stops operations in response to a fire, explosion, or release, the EC or designee must monitor for leaks, pressure buildup, gas generation, or ruptures in valves, pipes, or other equipment, whenever this is appropriate.

During response to fires or explosions, care will be taken to contain and recover any run-off of waste and water, foams, or chemicals applied to the fire. After the fire is extinguished, under the direction of the EC any released material is collected and the surrounding area will be decontaminated if necessary (refer to section 8.4.2).

Tanks and other storage units containing hazardous wastes and auxiliary fuel exposed to any heat as a result of a fire or explosion are cooled with a water spray. Fire hydrants are strategically located throughout the facility in sufficient quantities to reach any area. Containers filled with hazardous wastes and exposed to high temperatures are water cooled or moved to another location, if possible. Except for solid waste bulk containers containing no free liquid, all tanks, containers, and storage units in Areas 50A, 50B, 50C, 50D, 50E, 50F, the waste receiving building, are equipped with secondary containment to minimize spread of fires and releases thus reducing any explosive effect. The automatic fire fighting deluge system in the Area 50D Waste Receiving Building can be activated either manually or automatically. Areas 57A, 57B, and 57C are equipped with both an overhead sprinkler system with automatic activation by thermal (heat) sensor and an in-rack sprinkler system that provides fire suppression



coverage for all containers stored on the racks. Area 57D and Area 57F are equipped with an overhead sprinkler system that provides fire suppression coverage for the storage area and building. All areas storing hazardous wastes are equipped with appropriate fire protection equipment and manually operated fireproof doors.

Should water reactive waste or materials be involved in a fire, explosion, or adverse chemical reaction, the EC will ensure that the facility personnel use appropriate extinguishing or diluting agents (Dry Chemical, CO2, "D" rated fire extinguishers, or dirt), to make the effected reactive safe. The EC will ensure that all reactive contaminated agents are segregated and monitored for reactivity.

The EC decides whether an emergency event is or is not readily controllable with existing portable fire extinguishers or facility equipment and material on hand. Fire fighting is not conducted if the risk to facility personnel appears high.

The EC coordinates the notification of the local fire departments. The local fire department is called in for all situations in which fires and/or explosions have occurred and the contingency plan is implemented (refer to Section 7.0). The EC coordinates fire fighting activities until the local fire equipment arrives. At that time, the responsibility for fire fighting rests with the local fire fighting and emergency personnel under the direction of the department's fire chief. The EC remains onsite to assist as needed, provide information concerning wastes, processes, facilities, and to watch for and control any additional problems. If an incident occurs that necessitates a facility evacuation, the entire facility is evacuated according to the evacuation plan (Section 12.0).

Prairie fires outside of the facility perimeter in Section 29 are the responsibility of the Kimball Rural Fire Department (KRFD). If the fire could threaten the facility, the combined efforts of the KRFD and CHESI could be used for the required protection. Protection of the facility in the event of a prairie fire is ensured, however, by a graveled or concrete

#### **8.4.2 Spill or Material Release**

If a hazardous waste spill, material release, or process upset occurs resulting in a probable waste material vapor release, the EC assesses the magnitude and potential seriousness of the spill or release.

If the initial evaluation of a spill or leak indicates that an emergency does not exist, cleanup is accomplished by personnel under the supervision of the supervisor of the operating area. If, however, the initial evaluation of the spill or leak indicates that the situation is critical, the EC activates the Contingency Plan.

The following actions are initiated to isolate the affected area, as necessary:

- Shutoff valves, pumps, and electrical equipment, as required;
- Initiate a facility shutdown if major units (e.g. the incinerator) may be affected;
- Barricade or isolate area(s) and wastes, as required.

Spills contained within a curb or sump are pumped into a drum, mitigated with absorbent material, or, if necessary for larger spills, a vacuum unit may be used to suck up the spilled materials prior to unloading the wastes into the applicable storage tank. The compatibility of the spilled material in relation to the storage vessel or container is evaluated before any materials are transferred. Spills of solids are cleaned up by removing all materials with shovels or other equipment, and by placing the wastes into a labeled container.

Sorbent pads, earth, sand bags, or other inert materials are used to contain, divert, and cleanup spilled materials, if a spill has not been contained by a curb or sump. If the spill impacts unpaved areas, all impacted soil is removed and confirmation soil samples will be compared to the USEPA

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perimeter roadway inside the facility's chain link fence area, and also by  
CHESI's fire protection equipment used by the ERT.

Region III Preliminary Remediation Goals (Residential Standards) to ensure the clean-up is complete.

All spilled material, recovered waste, absorbent material, or any other material that results from a release, fire, or explosion at the site will be managed as a hazardous waste. These materials will be packed in containers, stored, and labeled prior to incineration, or, where necessary, shipped for off-site treatment and/or disposal at a designated facility.

The facility provides for safe storage, processing, or treatment of all recovered wastes, contaminated soil, or surface water that may result from a response to any onsite emergency.

#### **8.4.3 Accidental Mixing of Incompatible Wastes**

The facility has been designed and is operated to prevent the accidental mixing of incompatible waste. However, if such mixing occurs, the accident could result in the following types of situations:

- Generation of extreme heat, fire or explosion;
- Production of toxic mists, fumes, dust or gases;
- Production of flammable fumes or gases which pose a risk of fire or explosion;
- Structural damage to units at the facility.

During an emergency, the EC will take all reasonable measures necessary to ensure that additional fires, explosions, and releases do not occur, recur, or spread to other hazardous waste at the facility. These measures must include, where applicable, stopping processes and operations, collecting and containing release waste, and removing or isolating containers.

The emergency response procedures described in this plan are implemented according to the severity and type of accident as determined by the EC. In all cases, the EC will appraise the situation, activate the appropriate alarm(s) and communication systems, where applicable, to notify all facility personnel, assess possible hazards to human health or the environment (including both direct and indirect effects of the release, fire,

or explosion), and initiate measures necessary to protect human health and the environment. Implementation of this contingency plan is required whenever there is an emergency situation that threatens human health or the environment, as described in Section 7.0 of this plan.

#### **8.4.4 Tank Spills**

If a spill has not been contained by a curb or sump, sorbent pads, earth, sandbags, and other inert materials are used to contain, divert, and clean up the material. Depending on the size of the spill, spills contained within a curb or sump may be pumped into an appropriate bulk or non-bulk container. The compatibility of the spilled material in relation to the storage tank or container is evaluated before any transfer. All spilled materials are destroyed by thermal oxidation at the facility or shipped offsite to a designated facility. After the event, the facility equipment is evaluated for operating capability and any repairs are implemented as soon as possible. The NDEQ is advised of any major repairs.

#### **8.4.5 Container Spills and Leaks**

Spilled material (liquids, sludge, and semisolids) will normally be contained in the area where the spill occurs. All spills will be collected and subsequently transferred to approved storage or to a 90-day accumulation area. In the unlikely event that spills occur outside of a containment area, all material will be kept from entering any storm drains or migrating offsite.

Incompatible wastes are segregated by distance, concrete curbs, gutter troughs, and/or containment bays. As necessary, spills will be segregated and cleaned immediately to prevent commingling of waste. Therefore the probability of incompatible wastes comingling is minimal.

If a drum containing a liquid cannot be moved without rupture, the drum contents are immediately transferred to a sound container designed for that liquid. The container is appropriately labeled. If a drum containing sludge or semi-solids is leaking or deteriorated, but can be moved without rupture, the drum is immediately placed within an overpack container.

Spills of solids are cleaned up by removing all materials with shovels or other appropriate equipment and placing the materials into an approved container. The container is labeled and stored prior to incineration, or where necessary shipped offsite for treatment and disposal at a designated facility.

Bulk container spills are handled as described above. Bulk containers within the bulk container staging areas of the facility are placed inside secondary containment. In case of leakage of a bulk container, the container contents are transferred to another approved container.

All information on follow-up inspection of spills or leaks is noted on the facility inspection log form (Inspection Plan, Section E-2).

#### **8.4.6 Tank is Destroyed**

If a tank is destroyed by a tornado it could result in a fire and/or explosion, spill or material release, accidental mixing of incompatible wastes, tank spills, or a container spill and/or leak.

In the case of a tornado, the EC determines what the damage is and to what extent. The EC coordinates with the facility management and local authorities as necessary. The EC then coordinates the cleanup and/or repair activities as outlined in the Contingency Plan.

### **8.5 Prevention of Recurrence or Spread of Fires, Explosions or Releases**

The facility contains engineered and operational safeguards to control an emergency situation to ensure that fires, explosions, or releases do not recur or spread to other hazardous wastes or operations at the facility.

The TOU feed system is interlocked with safety controls so that the fuel and waste feed can be manually or automatically stopped whenever a potentially hazardous situation is detected. The interlock system must be reset after an upset condition to ensure correct TOU operation prior to restarting waste feeding to the TOU. If the TOU is shut down due to an emergency, the waste feed and auxiliary fuel is stopped.

As described in Sections 8.4.1, 8.4.2, 8.4.3, 8.4.4, 8.4.5, and 8.5.1, the following actions are taken in the facility waste processing and storage areas to prevent the recurrence or spread of fires, explosions, or releases by:

- Stopping processes and operations;
- Collecting and containing released material;
- Recovering or isolating containers;
- Segregation of incompatible waste.

Facility personnel training courses address the specific actions to be taken in the event of an emergency.

#### **8.5.1 Incident Investigation**

NDEQ will be notified as required whenever the Contingency Plan is implemented (refer to Section 7.0). The time, date, and details of any incident that requires implementing the Contingency Plan will be placed in the operating record. If the Contingency Plan is implemented, a written report will be submitted to NDEQ within 15 days after the incident and will include the following information:

- Name, address, and telephone number of the facility owner;
- Name, address, and telephone number of the facility operator;
- Date, time, and type of incident (e.g., fire, explosion);
- Name and quantity of material(s) involved;
- The extent of injuries, if any;
- An assessment of actual or potential hazards to human health or the environment, where applicable; and
- Estimated quantity and disposition of recovered material that resulted from the incident.

Investigations of all incidents (fire, explosion, releases, and accidents) are conducted at the facility in order to provide an in-depth understanding of the cause of an accident and to determine what may be done to prevent a recurrence.

Root cause analysis methodology is utilized for investigating, categorizing, and eliminating root causes of all incidents and near misses.

Management and supervisory personnel collect and analyze data and information relevant to the incident/near miss to identify contributing factors and causes, develop appropriate corrective action, generate practical preventive recommendations, and validate the effectiveness of the corrective action.

#### **8.6 Facility Shutdowns [40 CFR 264.56(f)]**

If the facility stops operations in response to a fire, explosion or release, the EC will monitor for leaks, pressure build-up, gas generation, ruptures, or other hazards in valves, pipes, or other equipment whenever this is appropriate.

#### **8.7 Storage and Treatment of Released Material [40 CFR 264.56(g)]**

Immediately following a release, the Emergency Coordinator (EC) will make arrangements for the treatment, storage, or disposal of recovered wastes, contaminated soil, surface water, and any other contaminated materials. All recovered contaminated containment and cleanup materials (e.g., absorbent pads, sand bags) are reduced to the required size prior to being stored in an approved container and appropriately labeled. Recovered wastes and contaminated materials may be destroyed in the TOU where possible, or shipped to a designated offsite treatment and disposal facility.

If concrete secondary containment has been contaminated with hazardous wastes, the affected containment areas are washed with an approved solution. Mobile equipment may be decontaminated in the truck wash bay. The rinsate is collected and either destroyed in the TOU or transported offsite to a designated facility for proper treatment and disposal.

##### **8.7.1 Incompatible Wastes [40 CFR 264.56(h)(1)]**

Hazardous wastes and recovered materials that are also incompatible wastes are segregated using separate containers and areas thereby eliminating the risk for any accidental mixing. Released materials that are incompatible are stored in tanks and containers constructed of compatible materials. Pumps and piping used to transfer the incompatible materials are constructed of materials that are compatible with the waste being transferred. Labeling and storage following waste sampling and characterization is maintained and tracked by computer to avoid confusion



and prevent accidental mixing of recovered incompatible waste. Should an emergency force the shut down of an operation, the operation will not be restarted until all spilled material has been completely cleaned up. (Refer to Sections D-1 (Container Report), D-2 (Tank Engineering Report), and E-2 (Inspection Plan) for further discussion regarding incompatible waste storage and handling.)

## **9.0 POST-EMERGENCY PROCEDURES**

### **9.1 Equipment Maintenance [40 CFR 264.56(h)(2)]**

After an emergency, all emergency equipment used in the response event is decontaminated, cleaned, and stored so that the equipment is fit for normal use. If a piece of equipment cannot be decontaminated as required, the equipment may be incinerated as site generated waste or disposed of in an approved manner. Before operations are resumed, the Health and Safety Manager or designee inspects the emergency and safety equipment to ensure that all equipment has been properly decontaminated or replaced with new equipment.

A typical equipment cleaning procedure consists of preliminary washdown of residues with water, followed by a high pressure washing. Steam cleaning or rinse decontamination follows to remove residual cleaning solution. Rinse waters are collected and either incinerated onsite or sent offsite to a designated facility.

This facility maintains a mobile response unit. All emergency response equipment located in the mobile response unit is primarily for off-site use, and as such is not included in this facility's RCRA inventory of emergency equipment.

### **9.2 Resumption of Interrupted Operations [40 CFR 264.56(i)]**

If an emergency occurs that requires implementation of the Contingency Plan, those operations that were shut down cannot be restarted until full standard emergency and safety equipment supplies have been restored. In the event the Contingency Plan is activated, CHESI verbally notifies the NDEQ and any applicable state and local authorities that the facility is in compliance with the NDEQ Title 128 and 40 CFR 264 before resuming operations in the affected area(s) of the facility. This verbal notification is followed up by a written notification within 15 calendar days of the verbal notice.

### **9.3 Written Notification [40 CFR 264.56(j)]**

Written notification of any incident requiring implementation of the Contingency Plan is submitted to NDEQ within fifteen (15) calendar days of the incident.

The written notification report includes the following information:

- Name, address, and telephone number of the owner/operator of the facility;
- Name, address and telephone number of the facility
- Date, time, and type of incident;
- Name and quantity of material(s) involved;
- Extent of injuries, if any;
- Assessment of the actual or potential hazards to human health or the environment, where applicable;
- Estimated quantity and disposition of recovered material resulting from the incident.

All written notification reports are submitted to the NDEQ Director at the following address:

Nebraska Dept. of Environmental Quality  
Suite 400, The Atrium  
1200 "N" Street  
Lincoln, Nebraska 68509-8922

## **10.0 EMERGENCY EQUIPMENT [40 CFR 264.52(e)]**

The following is a list of the emergency equipment that is maintained onsite. CHESI provides the equipment for use under the direction of the EC and Casualty Control Officer (CCO) (Paragraph 11.0). All equipment listed in section 10.0, 10.2 & 10.3 is maintained continuously on site in the locations indicated.

| Equipment                                       | Location   | Capabilities                                |
|---|--|---|
| Low-pressure self-contained breathing apparatus | Area 20, Area 55, Area 70 MCC, HAZMAT Unit                     | Personal breathing apparatus                |
| Portable two-way radios                         | Throughout TOU facility  | Communication within the facility           |
| Fire blankets                                   | Area 10 - Shop Building  | To extinguish fires or protect combustibles |
| Firemen's bunker clothing                       | Bunker Trailers – North of Area 20 Warehouse, North of Area 60 | To protect fire fighters                    |

### 10.1 Hazardous Material (HAZMAT) Unit

A HAZMAT unit is stationed at the facility to respond to off-site spills within Kimball County when requested by local authorities. Employees of the ERT team HAZMAT unit are available 7 days a week, 24 hours a day. However because this capability is provided for off-site response it should not be considered a part of this permit application.

### 10.2 Fire Detection and Suppression Systems

Fire detection and suppression systems are installed at locations throughout the facility. If a fire occurs, these systems react rapidly to minimize the impact and reduce the chance of fire spreading to other areas. These systems are installed at the following locations.

Building Area 20 sampling / warming bays have an automatic dry pipe pre action overhead water/foam sprinkler system in each bay. Detection/alarm and actuation are automatic via UV/IR (Ultraviolet/ infrared) fire detectors.

The outside storage pads, Area 25, 27, 40, and 95 have manual water spray fire systems consisting of fixed turret monitors and hydrants with hose racks. The detection system is visual by plant personnel who are onsite 24/7 in the outside areas.

Area 50C has an automatic zoned overhead dry/foam sprinkler system activated by UV/IR.

Area 50D has an automatic overhead wet sprinkler system and in rack fixed sprinklers. The overhead system is actuated by UV/IR detectors and the in- rack system is actuated by thermistor wire (temperature activated) fire sensors in the racks.

Area 50F has an automatic zoned overhead dry/foam sprinkler system activated by UV/IR in the process room and above the hoppers in the Wet Solids Storage Hopper room.

Area 55 has an automatic zoned overhead dry pipe water sprinkler system. Activation is by UV/IR detectors. Additionally there are alarms sounded in the two control rooms that overlook building 55 process areas when smoke, heat, or fire is detected by the UV/IR detectors. The building hoppers have fixed water spray systems installed which can be individually turned on by either control room operators to water spray a specific piece of equipment if smoke were detected either by the UV/IR detectors or visually. The shredding system, conveyors and magnetic separator have a fixed water system allowing the operator to flood the enclosed system if needed.

Areas 57A, 57B, and 57C are equipped with an automatic fire sprinkler system. The sprinkler system is a wet pipe system with automatic activation using thermal-sensing element sprinklers. An in-rack fire sprinkler system is installed on the first and second levels of the racks to ensure proper coverage of all containers in the racks. There is a three-hour rated fire wall separating the Area 57A receiving area from the Area 57B bulk/non-bulk storage area. The wall contains three automatic closing fire-rated rollup doors for fork lift traffic. There is a containment berm installed around the building perimeter to contain a 20-minute firewater event for the manual zone size of 5,000 square feet.

Area 57D and Area 57F are equipped with an automatic fire sprinkler system. The sprinkler system is a dry pipe system with automatic activation using

thermal-sensing element sprinklers. There is sufficient containment within the building to contain a 20-minute fire water event.

The facility fire extinguishing system is designed, constructed, and maintained to conform to the National Fire Protection Association (NFPA) codes and Nebraska State Building and Fire Codes. The facility's fire extinguishing systems include the following:

| <b>Physical Description</b> | <b>Area and Location</b>   | <b>Capabilities</b>                                |
|-----------------------------|--|--|
| Fire/Well Water Tank        | Area 30  | Provides 270,000 gallons of water for fire service |
| Firewater Pumps             | Area 30  | Supplies firewater                                 |
| Firewater Mains             | Encircles the facility   | Supplies firewater                                 |
| Wall Fire Hose Cabinet      | 10 - North and South of Shop Building,<br>50 - South of Waste Receiving Building,<br>55 - North of Waste Processing Building,<br>57A, 57B, and 57C – North side of facility,<br>58 – Northeast and Northwest corner,<br>60 - Southeast of exhaust stack,<br>South of Area 85 and,<br>East of Area 20 | Stores Fire Hoses                                  |
| Yard Hydrants               | 10 - East of Truck Scale,<br>45 - North of TOU,<br>58 – Northeast, Northwest, West and East Sides<br>60 - North of SDA,  | Provides water and/or foam                         |

| Physical Description | Area and Location   | Capabilities |
|----------------------|---|--------------|
|                      | 60 - Northeast of fabric filters,<br>60 - Reagent System Building,<br>35 - Caustic Building,<br>35 - Generator Pad,<br>70 - West End of Tank Farm,<br>80 - West End of Ash Day Bins,<br>85 - Ash Stabilization Building,<br>90 - Wastewater Treatment Building,<br>Areas 95, 25, 70C, 50A, 50B and,<br>55 - West side of Building 55 Treatment Building<br>57A, 57B, 57C – South side of building<br>57D – SE of building<br>57F – NW of building |              |

|  |   |  |
|--|---|--|
| Fire Hose Stations   | Area 30,<br>10 - Warehouse,<br>10 - Laboratory,<br>10 – Admin Building,<br>10 - Shop Building,<br>50D - Waste Receiving Building,<br>50C - Dry Solids Feed Conveyor,<br>50F – Process Room and Wet Solids Storage Hoppers<br>45 - TOU,<br>85 - Ash Stabilization Building,<br>90 - Wastewater Treatment Building,<br>55 -Waste Processing Building<br>57A - Container Receiving/Storage | Provides water and/or foam for use with fire hoses |
| Alarm Sprinkler Systems (water flow switch and anti-tamper switches) | 10 - Laboratory,<br>10 - Admin. Building,<br>10 - Shop Building,  | Fire detection systems (closed sprinkler heads)    |

|  |   |  |
|--|---|--|
|  | 50 (C, D, F)- Waste Receiving Building<br>(Mech. Equip. Room and Overpack<br>Storage),<br>55 - Waste Processing Building<br>57A, 57B, 57C – Warehouse Building<br>(container receiving, storage, and staging<br>areas),<br>57D – Oxidizer Building<br>57F – Thaw Building |  |
|--|---|--|

| Physical Description              | Area and Location   | Capabilities   |
|-----------------------------------|---|--|
| Fixed Water Spray System          | 55 - Waste Processing Building                                  | UV/IR system for entire building in addition to a manual system above shredders and hoppers. |
| Overhead Deluge Sprinkling System | 55 - Waste Processing Building                                  | Fire detection System (UV/IR)  |
| Pre-Action Sprinkling System      | 20 - Truck Wash/Warm Building<br>55 - Waste Processing Building | Fire detection system (UV/IR)  |

|  |                         |                               |
|--|-------------------------|-------------------------------|
| Pre-Action Sprinkling System and Separate In-Rack Pre-Action Sprinkling System | 50D - Drum Storage Area | Fire Detection system (UV/IR) |
|--|-------------------------|-------------------------------|

|  |  |  |
|--|--|--|
| Pre-Action Sprinkling System w/Under-Tank Protection | 50F - Drum Processing Area   | Fire detection system (UV/IR)                    |
| Pre-Action Sprinkling System                         | 55 - Dry and Wet Solids Process Areas<br>50C – Waste Receiving Building<br>50F - Wet Solids Storage Area Building  | Fire detection system (UV/IR)                    |
| Smoke Detectors                                      | Electrical Rooms,<br>31 – North tank farm controls building<br>35 - Controls Building<br>70 - Tank Farm<br>MCC Buildings<br>57A, 57B, 57C Warehouse Building<br>57D – Oxidizer Building<br>57F – Thaw Building                     | Alarms when smoke is detected                    |
| Physical Description                                 | Area and Location  | Capabilities                                     |
| Monitor Nozzles                                      | 45 - TOU,<br>70 - Tank Farm,<br>Areas 95, 25, 70C, 50A, and 50B  | Provides water and/or foam                       |
| Wall Hydrants  | 85 - Ash Stabilization Building<br>90 - Wastewater Treatment Building<br>10 - Shop<br>20 - Truck Wash/Warm Building<br>50 - Waste Receiving Building<br>55 - Waste Processing Building<br>10 - Administration Building and Area 30 | Provides water                                   |
| Class ABC fire extinguishers                         | Throughout the facility  | Dry, chemical type, portable fire extinguishers. |



|                      |   |   |
|----------------------|---|---|
| Manual Pull Stations | All waste storage buildings                                 | Employees pull to indicate emergency situation exists |
| Dry Chemical System  | 50C - Dry Solids Processing in the Waste Receiving Building | All Manual  |
| Heat Detectors       | 57D – Oxidizer Building                                     | Alarms when heat is detected                          |

The facility's automated fire fighting capabilities are shown in Drawing # 140-P-615 (Refer to Section D-4, Process & Instrumentation Drawings).

### 10.3 Spill Control and Containment Equipment

Spill control and containment equipment, stored at various locations throughout the facility, are listed below:

| Materials/Equipment  | Capabilities   |
|--|--|
| Standard industrial sorbents (e.g., Sorb-All, Vermiculite) | Used for small spills of oil, solvents, aqueous materials and neutralized acid/caustic materials |
| Broom, Shovel or Dustpan                                   | Used to remove absorbed materials  |
| Sorbent Pads   | Used to help contain materials within diked or curbed areas                                      |
| Submersible Pump   | Used to help remove liquids within diked or curbed areas   |
| Vacuum Unit  | Used to collect spilled wastes   |

Additionally spill kits are strategically positioned throughout the facility to facilitate quick response to minor spills. Spill kits consist of absorbent material and/or pads and shovel and brooms. Drawing # 140-A-087 (Refer to Section D-4, Process & Instrumentation Drawings) provides a diagram of the kit location. Miscellaneous equipment, located in the facility's warehouses, that may be used in the event of a spill include:

- 5-gallon buckets
- Mops
- Squeegees
- Shovels
- Drip pans
- 55-gallon drums
- Solvent
- Bags
- Shovels and/or scoops
- Rags
- Tools for tightening fittings and valves

#### **10.4 Emergency Alarm Systems**

The offsite communication network consists of the local telephone network. The internal network consists of a private portable radio system and the facility-wide public address (PA) system. Hand-held portable radios link supervisors and key operations personnel. The PA system is accessed from any telephone located throughout the facility. A backup electronic bullhorn is also available onsite in the HAZMAT Unit.

An extensive automatic/manual heat sensing and smoke detector fire alarm system is maintained 24 hours per day, 365 days per year. The fire alarm may be operated off backup battery power and/or emergency generator along with the exit lighting system. Local fire alarms are used in the Analytical Laboratory, Administration Building, Waste Receiving Building, Shop, Ash Stabilization Building, Wastewater Building, Truck Wash/Warm Building and MCCs and Waste Processing Building, and Areas 57A, 57B, 57C, 57D and 57F. Site wide fire alarms are located at strategic points in the plant.

The primary emergency alarm is a siren mounted on top of Area 50, the Waste Receiving Building. A steady continuous tone from the siren indicates an employee alert and visitor evacuation. A high-low varying pitch from the siren indicates an immediate evacuation of the facility. Two short blasts and a verbal announcement over the PA/radio indicate all clear and return to the facility. This system is tested weekly.

### **10.5 First Aid Supplies**

Emergency eyewash fountains/showers are located throughout the facility where the probability of personnel being contaminated is high. The eyewash fountain and emergency shower are operated by valves operated by panic bars. A sign reading “EMERGENCY SHOWER AND EYEWASH FOUNTAIN” or similar wording is posted at each unit. Standard first-aid kits are located throughout the facility in fixed locations.

### **10.6 Protective Clothing and Equipment**

All available protective clothing and equipment that is provided at the facility in addition to the equipment provided on the HAZMAT unit is listed below:

- Plastic aprons and gauntlets;
- Chemical-resistant rubber boot;
- Chemical-resistant rubber gloves;
- Chemical-resistant suits (e.g. Tyvek and Saranex);
- Hard hats;
- Steel-toed boots;
- Face shields and protective eye glasses;
- Respirators with disposable filters;
- Chemical cartridge respirators with cartridges for organic vapors and acid gas, and full-face types;
- Low-pressure, self-contained breathing apparatus;
- Fireman’s bunker clothing.

## **11.0 CASUALTY CONTROL**

The Casualty Control Officer (CCO) is the Health and Safety Manager, or designee. The CCO has primary responsibility for medical assistance and coordination of first aid/offsite medical aid.

The CCO shall:

- Ensure training includes current American Red Cross (or equivalent) emergency first aid and CPR certifications for required personnel;

- Establish procedures for the response personnel to meet at designated areas after the emergency alert alarm is sounded, activate first aid stations, and prepare for emergency first aid administration;
- Arrange for outside medical services (paramedics, ambulance, hospital);
- Supervise emergency first aid by onsite personnel;
- Assemble toxicity, or other relevant waste characteristic and treatment information from the facility operating records, SDS, CHEMTREC, National Poison Center, local hospitals/fire departments, etc.;
- Assist offsite medical service personnel by providing notification to the applicable hospital or emergency room of the arrival of casualties, nature of injuries, information on toxicity and decontamination, and other pertinent information.

A sufficient supply of emergency equipment and first aid supplies are available at the facility to ensure the safety of personnel in the event of an accident. CHESI maintains unstaffed industrial first aid stations including emergency eyewash/shower units in major facility areas which are available to personnel 24 hours per day.

A fully equipped emergency room (trauma unit), and hospital, are available five miles north of the facility in Kimball, Nebraska. Emergency Medical Technician (EMT) service is also available from the County Ambulance Service. Selected facility employees are trained and qualified to administer CPR and first aid.

## **12.0 EVACUATION PLAN FOR CHESI FACILITY [40 CFR 264.52(f)]**

### **12.1 Facility Entrance and Exit**

The facility is located in an isolated rural area of southwestern Nebraska. Access to the facility is by Nebraska State Highway 71 going south from Interstate 80.

Access to the facility is always controlled. During an emergency, the security guard allows immediate access to emergency response personnel. Other state and federal representatives are allowed access by the EC or designee as health and safety considerations dictate.

## **12.2 Evacuation Procedures**

CHESI performs annual mock evacuations in order to evaluate the adequacy of the procedures. The EC, or designee, assesses a hypothetical emergency or hazardous situation occurring or with the potential of occurring at the facility. The EC, or designee, decides whether or not to evacuate the facility. If the decision to evacuate the facility is made, the EC, or designee, notifies the personnel of the evacuation. If instructed, operators immediately initiate an emergency shutdown sequence and all personnel leave the facility through one of the egress gates. Determined by wind direction, personnel then assemble at one of designated assembly areas. One assembly area is located on the grass west of the parking lot (Area 15) on the West side of the facility and just past the Security building. The Plant EC will designate an alternate evacuation point at the time of the emergency. The EC, or designee, when deeming that the facility should be evacuated, sounds the emergency siren as indicated in Section 10.4.

All evacuated personnel meet at one of the designated areas. The EC, or designee, ensures that all personnel are accounted for and have vacated the facility.

The EC, or designee, provides training covering facility evacuation procedures to each employee annually and when major changes in procedures are instituted.

Evacuation routes to the assembly areas are posted at various locations throughout the facility. These routes are shown in Drawing # 140A-085 (Refer to Section D-4, Process & Instrumentation Drawings).

When evacuating the facility, the exit is governed by numerous windsocks positioned in such a way to be easily sighted from any place inside or outside the facility. All personnel are trained to move at right angles to wind direction as soon as possible. Everyone is required to evacuate except those needed or designated during the emergency. Those who evacuate are required to shut down all running equipment and go on foot to the nearest gate that is not in the path of the gas or vapors. Employees are then directed to a safe area. The EC, or designee, will broadcast evacuation instructions by the facility communication

system. Smoking is not permitted anywhere in or near the facility during an evacuation.

### **12.3 Re-Entering the Facility**

When the cause of the evacuation has been cleared, the EC sounds the siren twice as the “All Clear” signal for all personnel to return to their jobs. No one may return until the “All Clear” signal has been given.

Emergency equipment required by the Contingency Plan must be restored and in full operating condition before resuming operations.

## **13.0 COMMUNITY IMPACT MITIGATION**

In anticipation of the possibility that areas adjacent to or near the facility may be endangered as a result of an emergency, CHESI representatives discuss procedures for evacuating the facility and surrounding areas with the local authorities.

CHESI provides emergency information to all residents living within a two mile radius of the center of the facility.

## **14.0 SEVERE WEATHER PROCEDURES**

The TOU usually operates during high winds. However, if sustained severe winds, severe rains, or severe electrical storms are threatening, the TOU may be shut down in time to allow personnel not required to monitor the TOU to return home. In case of tornado sightings in the vicinity of the facility, the EC requires essential personnel to stay inside the control room. The control room provides a central location to gather all safety and emergency equipment that may be required during a tornado. It is also a communication center where information on weather conditions can be tracked and where contact outside the facility is available. CHESI also has installed two Tornado Shelters located west of the Area 20 Warehouse. The facility is shutdown in the event that facility personnel sight a tornado or when the EC or lead operator, under advisement by local officials or in his/her judgment, determines that the facility may be at risk from a tornado event.

The progress of each storm or tornado warning/sighting is monitored by the EC, designee, or lead operator to determine the distance and the direction to the facility. The EC, designee, or lead operator keep the operation personnel advised of the current status/location of the storm.

## **15.0 INCIDENT REPORTING**

Incident reporting for the facility is conducted by the Facility Compliance Manager, or designee. As discussed in Section 8.0, the National Response Center and the NDEQ is notified immediately when an incident which could threaten human health or the environment outside the facility is discovered.

If a release involves a Superfund Amendments and Reauthorization Act (SARA) Title III hazardous substance and it is released in quantities exceeding the reportable quantity (RQ), which may result in exposure beyond the facility boundary, immediate notification will be made to the Local Emergency Planning Committee (LEPC), and the State Emergency Response Commission (SERC).

Initial notification can be made by telephone, radio, or in person. A written report must also be provided to the LEPC and the SERC as soon as practicable after a release in excess of the RQ that may result in exposure beyond the facility boundary.

Any emergency event (e.g., fire, explosion, etc.) that requires implementing the contingency plan is reported in writing to the NDEQ Director within 15 calendar days after the incident. If the incident involved a fire and/or explosion, this report is also sent to the Nebraska State Fire Marshall. Verbal notification is given to the NDEQ within 24 hours of discovery of any non-compliance, which may threaten human health or the environment outside the facility.

## **16.0 REFERENCES**

NDEQ Title 128, "Nebraska Hazardous Waste Regulations," Nebraska Department of Environmental Quality, August 2007.

NDEQ, Title 128, Chapter 18, "Contingency Plan and Emergency Procedures, Department of Environmental Quality, May 2000.

40 CFR Part 264, “Standards for Owners and Operators of Hazardous Waste Treatment, Storage, and Disposal Facilities,” Code of Federal Regulations Office of the Federal Register, July 2013.

40 CFR 264 Subpart D, “Contingency Plan and Emergency Procedures,” Code of Federal Regulations, Office of the Federal Register, July 2013.

40 CFR 264.52(a)-(f), “Content of the Contingency Plan,” Code of Federal Regulations, Office of the Federal Register, July 2013.

40 CFR 264.53(a)-(b), “Copies of the Contingency Plan,” Code of Federal Regulations, Office of the Federal Register, July 2013.

40 CFR 264.54(a)-(e), “Amendment of Contingency Plan,” Code of Federal Regulations, Office of the Federal Register, July 2013.

50 CFR 264.55, “Emergency Coordinator,” Code of Federal Regulations, Office of the Federal Register, July 2013.

40 CFR 264.56(a)-(g), “Emergency Procedures,” Code of Federal Regulations, Office of the Federal Register, July 2013.

40 CFR 270.14(b)(7), “Contents of Part B: General Requirements,” Code of Federal Regulations, Office of the Federal Register, July 2013.



**APPENDIX F-1**  
**CHESI FACILITY EMERGENCY COORDINATORS**

### CHESI FACILITY EMERGENCY COORDINATORS

| NAME                                       | EMERGENCY RESPONSE TITLE      | HOME TELEPHONE                              | HOME ADDRESS   | OFFICE PHONE                 |
|--|-------------------------------|---|--|------------------------------|
| Kevin Wynne                                | Primary Emergency Coordinator | (308) 235-8103                              | 521 S. Jefferson St.<br>Kimball, NE  | (308) 235-8225<br>(Security) |
| <del>Gerald Pennel</del><br>Lezah Saunders | Emergency Coordinator         | <del>(308) 254-4414</del><br>(520) 705-3081 | <del>4525 Cedar St.</del><br>Sidney, NE 5763576<br>Road 37 West<br>Kimball, NE | (308) 235-8225<br>(Security) |
| Darrell Snyder                             | Emergency Coordinator         | (308) 235-2312                              | 601 S. Adams St.<br>Kimball, NE  | (308) 235-8225<br>(Security) |
| Jim Culek                                  | Emergency Coordinator         | (307) 235-4594                              | 713 S. Nadine St.<br>Kimball, NE   | (308) 235-8225<br>(Security) |
| Jon Rozelle                                | Emergency Coordinator         | (308) 241-0806                              | 201 Martin St.<br>Dix, NE  | (308) 235-8225<br>(Security) |
| Scott Smith                                | Emergency Coordinator         | (308) 235-3543                              | <del>513 South S. Adams St.</del><br>Kimball, NE                               | (308) 235-8225<br>(Security) |
| Kelly Dunegan                              | Emergency Coordinator         | (308) 235-4105                              | 315 S. Walnut St.<br>Kimball, NE   | (308) 235-8225<br>(Security) |
| -Doug Moench                               | Emergency Coordinator         | (308) 249-0208                              | -512 Sheridan St.<br>Potter, NE  | (308) 235-8225<br>(Security) |
| <del>Robert Earley</del><br>Heath Rowbal   | Emergency Coordinator         | <del>(308) 241-4724</del><br>249-0655       | <del>324 Birch Bushnell, NE</del><br>69128912 Stoetzel Ave.<br>Pine Bluffs, NE | (308) 235-8225<br>(Security) |
| Dave Whelchel                              | Emergency Coordinator         | (308) 673-5786                              | 1390 CR 14<br>Bushnell, NE   | (308) 235-8225<br>(Security) |
| Daniel Bateman                             | Emergency Coordinator         | <del>(307) 421-7691</del><br>(308) 230-0214 | <del>4321 E Hwy 30</del><br>Kimball, NE<br>691454321 E Hwy 30<br>Kimball, NE   | (308) 235-8225<br>(Security) |
| Brian DeBlois                              | Emergency Coordinator         | (308) 225-2274                              | 1122 S St.<br>Bridgeport, NE   | (308) 235-8225<br>(Security) |

|               |   |                |                                |                              |
|---------------|---|----------------|--------------------------------|------------------------------|
| Kevin Sherman | Kimball Facility Health<br>& Safety Manager<br>Off-Site Coordinator | (308) 235-2969 | 413 Madison St.<br>Kimball, NE | (308) 235-8225<br>(Security) |
|---------------|---|----------------|--------------------------------|------------------------------|

**Attachment 9**

**CHESI Ash Day Bin Work Order #041480**

**WORK ORDER REPRINT**

Page: 1

CLEAN HARBORS - KIMBALL, NE

**WO:** 041480      **Account:**      **Project:**      **Status:** F

|                      |                |                         |          |
|----------------------|----------------|-------------------------|----------|
| <b>Submitted By:</b> | Ken A. Redding | <b>Phone:</b>           |          |
| <b>Contact:</b>      |                | <b>Phone:</b>           |          |
| <b>Date,Time:</b>    | 04/30/19,15:51 | <b>Required:</b>        | 05/01/19 |
| <b>Type:</b>         | R              | <b>Dispatched To:</b>   |          |
| <b>Priority:</b>     | 1              | <b>Rating:</b>          | 9        |
| <b>Failure:</b>      |                | <b>Action:</b>          |          |
| <b>Est Down:</b>     |                | <b>Downtime:</b>        |          |
| <b>OS Date,Time:</b> |                | <b>RS Date,Time:</b>    |          |
| <b>Charge Code:</b>  | REPAIR-L       | <b>REPAIR LABOR</b>     |          |
|                      | REPAIR-M       | <b>REPAIR MATERIALS</b> |          |
| <b>Safety Procs:</b> |                | <b>PM Desc:</b>         |          |

**EQUIPMENT INFORMATION**

|                   |   |                      |
|-------------------|---|----------------------|
| <b>Equipment:</b> | H-408D  | <b>ASH DAY BIN</b>   |
| <b>Eqp Hier:</b>  | H-408D  | <b>Serial #:</b>     |
| <b>Location:</b>  | ASH DAY BINS  | <b>Model #:</b>      |
| <b>Keyword:</b>   | HOPPER-80, H-HOPPERS,BINS &<br>DRY STORAGE TANKS IN AREA 80 | <b>Manufacturer:</b> |

**PROBLEM DESCRIPTION**

Repair paint on outside of daybin where something has apparently swung from a rope damaging paint. NDEQ Inspection, WWINC# 60930

**COMMENTS**

Spot was caused by a rope that was left from hoisting material to top of daybin. Rope had a shackle tied to it that wore the paint. Paint damage was repaired by painting.

**AUTHORIZATION/COMPLETION INFORMATION**

|                       |                 |                    |          |
|-----------------------|-----------------|--------------------|----------|
| <b>Authorized By:</b> | DARREN RATZLAFF | <b>Authorized:</b> | 05/01/19 |
| <b>Planned By:</b>    |                 | <b>Planned:</b>    |          |
| <b>Completed By:</b>  | Collin Revord   | <b>Completed:</b>  | 05/03/19 |

**Attachment 10**

**CHESI Ash Sampler Work Order #041275**

**WORK ORDER REPRINT**

Page: 1

CLEAN HARBORS - KIMBALL, NE

**WO:** 041275      **Account:**      **Project:**      **Status:** F

|                      |                |                         |          |
|----------------------|----------------|-------------------------|----------|
| <b>Submitted By:</b> | James Culek    | <b>Phone:</b>           |          |
| <b>Contact:</b>      |                | <b>Phone:</b>           |          |
| <b>Date,Time:</b>    | 03/27/19,14:43 | <b>Required:</b>        | 03/28/19 |
| <b>Type:</b>         | R              | <b>Dispatched To:</b>   |          |
| <b>Priority:</b>     | 1              | <b>Rating:</b>          | 9        |
| <b>Failure:</b>      |                | <b>Action:</b>          |          |
| <b>Est Down:</b>     |                | <b>Downtime:</b>        |          |
| <b>OS Date,Time:</b> |                | <b>RS Date,Time:</b>    |          |
| <b>Charge Code:</b>  | INSPECT        | <b>INSPECTION LABOR</b> |          |
| <b>Safety Procs:</b> |                | <b>PM Desc:</b>         |          |

**EQUIPMENT INFORMATION**

|                   |  |                           |                           |
|-------------------|--|---------------------------|---------------------------|
| <b>Equipment:</b> | SP-403A  | <b>CONTINUOUS SAMPLER</b> |                           |
| <b>Eqp Hier:</b>  | SP-403A  | <b>Serial #:</b>          | 8197                      |
| <b>Location:</b>  | ASH DAY BIN CONVEYORS                              | <b>Model #:</b>           | GF RETRACTAB              |
| <b>Keyword:</b>   | SPECIAL-80, SP-ALL SPECIAL<br>EQUIPMENT IN AREA 80 | <b>Manufacturer:</b>      | Quality Control Equipment |

**PROBLEM DESCRIPTION**

auto sampler is stroking but nothing coming out.

**COMMENTS**

sample tube was plugged, cleared it out

**AUTHORIZATION/COMPLETION INFORMATION**

|                       |                 |                    |          |
|-----------------------|-----------------|--------------------|----------|
| <b>Authorized By:</b> | DARREN RATZLAFF | <b>Authorized:</b> | 03/27/19 |
| <b>Planned By:</b>    |                 | <b>Planned:</b>    |          |
| <b>Completed By:</b>  | Josh Holz       | <b>Completed:</b>  | 03/27/19 |